Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF FLORIDA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Brin- iden	e the name that is on a government-issued ure identification (for mple, your driver's ase or passport). g your picture tification to your ting with the trustee.	Robert First name Kenneth Middle name Schmidt Last name and Suffix (Sr., Jr., II, III)	Calli First name Jean Middle name Schmidt Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security ber or federal vidual Taxpayer tification number	xxx-xx-2720	xxx-xx-6203

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Debtor 1 Robert Kenneth Schmidt Debtor 2 Calli Jean Schmidt

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	6502 Barnes Road South Jacksonville, FL 32216 Number, Street, City, State & ZIP Code	If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code		
		Duval County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Debtor 1 Robert Kenneth Schmidt Debtor 2 Calli Jean Schmidt				Case number (if known)					
Par	t 2: T	ell the Court About \	/our Bank	cruptov C	200				
7.	The ch	napter of the uptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy						
	choos	ing to file under	■ Chap	,,	go to the top of page 1 an	a check the appre	priate box.		
			_ `						
			☐ Chap						
			☐ Chap						
			☐ Chap	oter 13					
8.	How y	ou will pay the fee	ab	out how yo	e entire fee when I file my ou may pay. Typically, if yo attorney is submitting you address.	u are paying the fo	ee yourself, you m	ay pay with cash, cashie	r's check, or money
					y the fee in installments. ee in Installments (Official F		option, sign and a	ttach the Application for	Individuals to Pay
			□ I re	equest that t is not req	at my fee be waived (You uired to, waive your fee, a	may request this o	if your income is I	ess than 150% of the off	icial poverty line that
					ur family size and you are on to Have the Chapter 7 F				
9.	Have y	ou filed for uptcy within the	■ No.						
		last 8 years?	☐ Yes.						
				District		When		Case number	
				District		When		Case number	
				District		When		Case number	
10.	Are an	y bankruptcy pending or being	■ No						
	filed b not fili you, o	y a spouse who is ng this case with r by a business r, or by an	☐ Yes.						
				Debtor				Relationship to you	
				District		When		Case number, if known	
				Debtor				Relationship to you	
				District		When		Case number, if known	
11.	Do you	u rent your	■ No.	Go to l	ine 12.				
	reside	nce:	☐ Yes.	Has yo	our landlord obtained an ev	iction judgment ag	gainst you?		
					No. Go to line 12.				
					Yes. Fill out <i>Initial Statem</i> this bankruptcy petition.	ent About an Evic	ction Judgment Aga	ainst You (Form 101A) a	nd file it as part of

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	otor 1 otor 2	Robert Kenneth Scl Calli Jean Schmidt	nmidt			Case number (if known)
Par	t 3:	Report About Any Bu	sinesses \	ou Own a	s a Sole Proprie	etor
12.	of an	ou a sole proprietor y full- or part-time ness?	■ No.	Go to Pa	art 4.	
			☐ Yes.	Name ar	nd location of bus	siness
	busin an ind separ as a d	e proprietorship is a ess you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC.			f business, if any	
	If you have more than one Number, Street, City, State & ZIP Code sole proprietorship, use a separate sheet and attach				tte & ZIP Code	
it to this petition. Check the appropriate box to describe your business: ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))		•				
					Single Asset Real	l Estate (as defined in 11 U.S.C. § 101(51B))
					Stockbroker (as d	defined in 11 U.S.C. § 101(53A))
					•	er (as defined in 11 U.S.C. § 101(6))
				1	None of the above	е
13.	Chap Bank	rou filing under oter 11 of the cruptcy Code and are a small business or?	deadlines operations	you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropried lines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statemed perations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the process 11 U.S.C. 1116(1)(B).		
	For a	definition of small	■ No.	I am not	filing under Chap	pter 11.
		siness debtor, see 11 S.C. § 101(51D).	□ No.	I am filin Code.	g under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
			☐ Yes.	I am filin	g under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4:	Report if You Own or	Have Any	Hazardous	Property or An	ny Property That Needs Immediate Attention
14.	•	ou own or have any	■ No.			
		erty that poses or is ed to pose a threat	☐ Yes.			
		minent and ifiable hazard to		What is the	hazard?	
		c health or safety? o you own any				
	prop	erty that needs ediate attention?			te attention is ny is it needed?	
	perisi livest or a b	xample, do you own hable goods, or ock that must be fed, building that needs nt repairs?		Where is th	ne property?	
	93.	r				Number, Street, City, State & Zip Code

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Debtor 1	Robert Kenneth Schmidt		
Debtor 2	Calli Jean Schmidt	Case number (if known)	

Part 5: Explain

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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	tor 1 Robert Kenneth Sc tor 2 Calli Jean Schmidt	hmidt		Case nu	umber (if known)			
Part	6: Answer These Questi	ons for Re	eporting Purposes					
16.	What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by a individual primarily for a personal, family, or household purpose."						
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe the	at are not consumer debts or bus	siness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you are paid that funds will be available		property is excluded and administrative expenses tors?			
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000	2 5,001-50,000			
		□ 50-99		□ 5001-10,000 □ 10,001 07 000	□ 50,001-100,000			
		☐ 100-19 ☐ 200-99		☐ 10,001-25,000	☐ More than100,000			
19.	How much do you	□ \$0 - \$5	•	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$100 million				
20.	How much do you estimate your liabilities	□ \$0 - \$5	,	\$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	to be?		01 - \$100,000 001 - \$500.000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
		+,	001 - \$1 million	□ \$100,000,001 - \$500 million				
Part	7: Sign Below							
For	you	I have ex	amined this petition, and I declare u	inder penalty of perjury that the i	nformation provided is true and correct.			
If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.								
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I request	relief in accordance with the chapte	er of title 11, United States Code,	specified in this petition.			
			cy case can result in fines up to \$25		ney or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		/s/ Robe	rt Kenneth Schmidt	/s/ Calli Jean				
			Kenneth Schmidt e of Debtor 1	Calli Jean So Signature of D				
		Executed	on May 10, 2018 MM / DD / YYYY	Executed on	May 10, 2018 MM / DD / YYYY			

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Debtor 1 Debtor 2	Robert Kenneth So Calli Jean Schmid			Case	Case number (if known)			
•	attorney, if you are ted by one	under Chapt	er 7, 11, 12, or 13 of title 11, United	d States Code, and have ex	nformed the debtor(s) about eligibility to proceed collained the relief available under each chapter ebtor(s) the notice required by 11 U.S.C. § 342(b)			
•	not represented by ey, you do not need s page.		se in which § 707(b)(4)(D) applies, ed with the petition is incorrect.	certify that I have no knowl	edge after an inquiry that the information in the			
			J. Sacks, Esquire Attorney for Debtor	Date	May 10, 2018 MM / DD / YYYY			
		Melanie J. Printed name	Sacks, Esquire 0158070					
		Law Office:	s of Sacks & Sacks, P.A.					
		Jacksonvill	son Street, Suite B e, FL 32207 City, State & ZIP Code					
		Contact phone	(904) 396-5557	Email address	Melanie@sacksandsackslaw.com			
		0158070 F Bar number & St	 `					

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Fill	in this infor	mation to identify your case:			
	tor 1	Robert Kenneth Schmidt			
Dob	tor 2	First Name Middle Name Last Name			
	use if, filing)	Calli Jean Schmidt First Name Middle Name Last Name			
Unit	ed States Ba	ankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA			
Cas	e number				
(if kno	own)				this is an
				amende	d filing
~		4000			
		orm 106Sum			
		of Your Assets and Liabilities and Certain Statistical Information and accurate as possible. If two married people are filing together, both are equally responsible for			2/15
infor	mation. Fill original for	out all of your schedules first; then complete the information on this form. If you are filing amenderms, you must fill out a new <i>Summary</i> and check the box at the top of this page.			
ı arı	Cumin	initize Tour Addition		,	
				four ass Jalue of v	what you own
1.	Schedule A	VB: Property (Official Form 106A/B)			
	1a. Copy lir	ne 55, Total real estate, from Schedule A/B		\$	132,000.00
	1b. Copy lir	ne 62, Total personal property, from Schedule A/B		\$	212,017.49
	1c. Copy lin	ne 63, Total of all property on Schedule A/B		\$	344,017.49
Part	2: Summ	narize Your Liabilities			
			١	Your liab	oilities
			F	Amount y	ou owe
2.		2: Creditors Who Have Claims Secured by Property (Official Form 106D) e total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D		\$	261,727.00
3.		F/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)		\$	0.00
	.,	ne total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		·	
	3b. Copy th	ne total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F		\$	55,769.00
		Your total liabilities	\$_		317,496.00
Part	3: Summ	narize Your Income and Expenses			
4.		Your Income (Official Form 106I) combined monthly income from line 12 of Schedule I		\$	7,025.20
5.		: Your Expenses (Official Form 106J) monthly expenses from line 22c of Schedule J		\$	7,120.09
Part	4: Answ	er These Questions for Administrative and Statistical Records			
6.	•	ing for bankruptcy under Chapters 7, 11, or 13? but have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur ot	her sche	dules.
	■ Yes	·			
7.	What kind	of debt do you have?			
		debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for hold purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a pe	rsonal, fa	amily, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debto	or 2 Calli Jean Schmidt	Case number (if known)	
8. I	From the Statement of Your Current Monthly Income: Col	py your total current monthly income from Official Form	0 000 00

 From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

8,882.20

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Robert Kenneth Schmidt

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	44,767.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	44,767.00

		Case	9.10-NK-019	13-37	AF DOG 1	r Filed 02/10/19	raye	10 01 00		
Fill	in this informat	tion to identify	your case and t	his filin	g:					
Deb	tor 1	Robert Kenne	eth Schmidt							
D-1-		First Name		le Name		Last Name				
	tor 2 use, if filing)	Calli Jean Sc First Name		le Name		Last Name				
Unit	ed States Bankı	uptcy Court for	the: MIDDLE D	DISTRIC	T OF FLORIDA	A				
Cas	e number								☐ Check if this is a	
Oas						- 			☐ Check if this is an amended filing	
_	ficial Forn	_	-							
Sc	hedule	A/B: Pr	operty						12/15	
	ver every question	n.	·			e top of any additional pages on or Have an Interest In	s, write your i	name and case	e number (if known).	
	No. Go to Part 2.	e any legal or eq	uitable interest in	any resid	dence, building,	land, or similar property?				
	Yes. Where is th									
1.1				Wha	t is the property	? Check all that apply				
	6502 Barnes	Rd. South		•	Single-family h		Do not dec	fuct secured cla	aims or exemptions. Put	
	Street address, if av	Street address, if available, or other description		Duplex or multi-unit building Condominium or cooperative		ti-unit building	the amount of any secur		ed claims on Schedule D: ims Secured by Property.	
					Manufactured	or mobile home	Current va	alue of the	Current value of the	
	Jacksonville	FL	32216				entire pro	perty?	portion you own?	
	City	State	ZIP Code			pperty	\$13	32,000.00	\$132,000.00	
									our ownership interest ancy by the entireties, o	
				Who		in the property? Check one	a life estat Fee Sim	te), if known. ple		
	Duval County	/			•			<u> </u>		
	County				Debtor 1 and [Debtor 2 only	- Chec	k if this is com	munity property	
						the debtors and another	(see in	structions)	y proporty	
					er information you	ou wish to add about this ite on number:	m, such as ic	ocai		
		e attached for I				rom Part 1, including any			\$132,000.00	

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Debte Debte		Robert Kenneth Schmidt Calli Jean Schmidt	C	Case number (if known)		
3. Ca	rs, van	s, trucks, tractors, sport utility ve	chicles, motorcycles			
	No					
•	Yes					
3.1	Make: Model:		Who has an interest in the property? Check one Debtor 1 only	the amount of any	cured claims or exemptions y secured claims on Sched ave Claims Secured by Pro	lule D:
	Other i	2016 ximate mileage: 42511 information: GKKRNED3GJ256357	 □ Debtor 2 only ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another 	Current value of tentire property?	portion you ow	n?
	Style 3.6L \	/ Body: SUV 4D Engine: V6 DI	Check if this is community property (see instructions)	\$22,600	J.00 \$22,6	600.00
3.2	Other i	2016 ximate mileage: 42511 information: GTR1LEC8GZ232473	Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	the amount of any Creditors Who Har Current value of the entire property?	portion you ow	dule D: operty. of the 'n?
		/ Body: Double Cab 4D ne: 5.3L V8 DI	☐ Check if this is community property (see instructions)	\$26,675	5.00 \$26,6	675.00
3.3	Other i VIN 1 Style 4.6L \ Curre Major New 3	Ford Mustang GT 2007 kimate mileage: 98500 information: ZVFT82H875275614 / Body: Coupe 2D Engine: v8 EFI ently Not Running. Needs r Electrical Wiring Done, A Starter, A New Battery And Has A Rear Differential Leak.	Who has an interest in the property? Check one ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)	the amount of any	portion you ow	dule D: operty. of the
3.4	Make: Model: Year:	Suzuki Hyabusa 2008 kimate mileage: 26140	Who has an interest in the property? Check one ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of any	cured claims or exemptions y secured claims on Sched ave Claims Secured by Pro- the Current value o portion you ow	dule D: operty. of the
	Other i	information: S1GX72A682107265	☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	\$6,800	, ,	800.00
Exa	amples: No Yes	Boats, trailers, motors, personal wa	nd other recreational vehicles, other vehicles, an atercraft, fishing vessels, snowmobiles, motorcycle	accessories	\$ 00.07	T. 00
			that number here		\$63,675	5.00

Official Form 106A/B Schedule A/B: Property

page 2

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	Robert Kenneth Schmidt Calli Jean Schmidt Case number (if known)	n)
Part 3:	Describe Your Personal and Household Items	
	own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Exam</i> _l □ No	chold goods and furnishings ples: Major appliances, furniture, linens, china, kitchenware s. Describe	
	Household: Couch, Mattresses, Dressers, Book Shelves, Dining Room Table, and Chairs, Washer and Dryer, Dishes, utensils, plates, cups, misc. other household goods.	\$1,000.00
	Books, Holiday decorations, Family Photos, Crib, Mattress, Sheets and other Bedding, Knick Knacks and Kids items they have grown out of or Memorabilia.	\$100.00
□ No	 pnics ples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; musi including cell phones, cameras, media players, games s. Describe 	c collections; electronic devices
	Electronics: Tvs, Laptop, Xbox 360 Location: 6502 Barnes Road South, Jacksonville FL 32216	\$600.00
	tibles of value ples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, co	sin or baseball card collections:
■ No	other collections, memorabilia, collectibles s. Describe	iii, oi basebaii caid collections,
Yes Equipo Example No		
Yes Equipo Example No	ment for sports and hobbies ples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoe musical instruments	es and kayaks; carpentry tools;
☐ Yes 9. Equipi Exam ☐ No ■ Yes 10. Firea Exam	ment for sports and hobbies ples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoe musical instruments s. Describe Old sporting equipment - Bats, Gloves, Basketballs, Volleyballs, Tennis Balls, Golf Balls, Softballs, Baseballs, Cleats, Bags, Bucket, Basketball Goal, Batting Gloves	es and kayaks; carpentry tools;
9. Equipi Exam No Yes 10. Firea Exam No Yes 11. Cloth Exam	ment for sports and hobbies ples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoe musical instruments s. Describe Old sporting equipment - Bats, Gloves, Basketballs, Volleyballs, Tennis Balls, Golf Balls, Softballs, Baseballs, Cleats, Bags, Bucket, Basketball Goal, Batting Gloves rms mples: Pistols, rifles, shotguns, ammunition, and related equipment s. Describe	

Official Form 106A/B

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Debtor 1 Debtor 2	Robert Kenneth Calli Jean Schn		nidt	Case number (if known)	
		lewelr	y: White gold w	vedding bands, Pandora Bracelet, Earrings,	
	-	Bracel Location		s Road South, Jacksonville FL 32216	\$500.00
	arm animals				
□ No	ples: Dogs, cats, bird	ds, hor	ses		
■ Yes.	Describe	\nima	ls: 5 Siborian U	luskies, Cat, Rabbit	
				s Road South, Jacksonville FL 32216	\$0.00
■ No	ther personal and h		-	lid not already list, including any health aids you did not list	
15. Add	the dollar value of	all of y	our entries fron	n Part 3, including any entries for pages you have attached	\$2,750.00
Part 4: De	escribe Your Financia	l Asset	s		
Do you o	wn or have any leg	al or e	quitable interest	t in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No				r home, in a safe deposit box, and on hand when you file your petition	חכ
				Cash on hand	\$5.00
Exam				accounts; certificates of deposit; shares in credit unions, brokerage hands with the same institution, list each.	nouses, and other similar
□ No ■ Yes.				Institution name:	
		17.1.	Checking	Checking Account: Navy Federal Credit Union Acct. No.: 0703	\$0.00
		17.2.	Checking	Checking Account: Navy Federal Credit Union Acct. No.: 9597	\$0.00
		17.3.	Checking	Checking Account: Navy Federal Credit Union Acct. No.: 8706	\$17.86
		17.4.	Checking	Checking Account: Vystar Credit Union Acct. No.: 2775	\$3,478.82
		17.5.	Savings	Savings Account: Navy Federal Credit Union Acct. No.: 8003	\$5.00
		17.6.	Savings	Savings Account: Vystar Credit Union Acct. No.: 6480	\$5.00
Official For	m 106A/B			Schedule A/B: Property	page 4

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	ebtor 1 ebtor 2	Robert Kenne Calli Jean Sc		Case number	er (if known)
18.			or publicly traded stocks investment accounts with bro	kerage firms, money market accounts	
	■ No □ Yes		Institution or issuer r	name:	
19.	joint ve		ock and interests in incorpo	orated and unincorporated businesses, including	an interest in an LLC, partnership, and
	■ No □ Yes.	Give specific inf	ormation about them Name of entity:	 % of owner	rship:
20.	Negotia Non-ne ■ No	able instruments egotiable instrum	include personal checks, cash	tiable and non-negotiable instruments hiers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.	
	— 100. V	Oive opcome mic	Issuer name:		
21.	Examp □ No		RA, ERISA, Keogh, 401(k), 40	03(b), thrift savings accounts, or other pension or pro	ofit-sharing plans
	■ Yes. I	List each accour	t separately. Type of account:	Institution name:	
			Thrift Savings Plan	TSP through employer	\$10,080.81
22.	Your sh		d deposits you have made so	that you may continue service or use from a compa public utilities (electric, gas, water), telecommunication	
	☐ Yes			Institution name or individual:	
23.	_	es (A contract fo	or a periodic payment of mone	y to you, either for life or for a number of years)	
	■ No □ Yes	ls	suer name and description.		
24.	26 U.S.C		on IRA, in an account in a qu 529A(b), and 529(b)(1).	ualified ABLE program, or under a qualified state	tuition program.
	■ No □ Yes	ln	stitution name and description	. Separately file the records of any interests.11 U.S.	C. § 521(c):
25.	Trusts,	equitable or fu	ture interests in property (of	ther than anything listed in line 1), and rights or p	powers exercisable for your benefit
	☐ Yes.	Give specific inf	ormation about them		
26.				d other intellectual property ds from royalties and licensing agreements	
	☐ Yes.	Give specific inf	ormation about them		
27.			and other general intangible mits, exclusive licenses, coop	s erative association holdings, liquor licenses, profess	sional licenses
	☐ Yes.	Give specific inf	ormation about them		
M	oney or p	property owed t	o you?		Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 5

claims or exemptions.

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Debtor 1 Debtor 2			Case number (if known	1)
28. Tax ı	refunds owed to you			
■ No	•			
☐ Ye	s. Give specific information about the	nem, including whether you already file	ed the returns and the tax years	
	•	ny, spousal support, child support, ma	intenance, divorce settlement, proper	rty settlement
	s. Give specific information			
		Robert Hunter owes Child Supp Joint Debtor	ort to the Child Support Arrearage	s \$132,000.00
Exai	benefits; unpaid loans you r	urance payments, disability benefits, si nade to someone else	ick pay, vacation pay, workers' comp	pensation, Social Security
		rance; health savings account (HSA);	credit, homeowner's, or renter's insur	rance
■ Ye	s. Name the insurance company of Company		Beneficiary:	Surrender or refund value:
	Insurance	e: Veterans Group Life Insurance	Joint Debtor and Minor Children	\$0.00
If yo som	eone has died.	ou from someone who has died t, expect proceeds from a life insuranc	e policy, or are currently entitled to re	eceive property because
■ No □ Ye	s. Give specific information			
_Exa	mples: Accidents, employment disp	or not you have filed a lawsuit or mutes, insurance claims, or rights to sue		
■ No □ Ye	s. Describe each claim			
34. Othe ■ No		aims of every nature, including cour	nterclaims of the debtor and rights	to set off claims
	s. Describe each claim			
35. Any ■ No	financial assets you did not alrea	dy list		
`	s. Give specific information			
		ntries from Part 4, including any entr		\$145,592.49
Part 5:	Describe Any Business-Related Prop	erty You Own or Have an Interest In. List	any real estate in Part 1.	
37. Do yo	u own or have any legal or equitable	interest in any business-related property	?	
No.	Go to Part 6.			
☐ Yes.	. Go to line 38.			

Official Form 106A/B Schedule A/B: Property page 6

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	tor 1 tor 2	Robert Kenneth Schmidt Calli Jean Schmidt		Case number (if known)	
Part		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
	_ ′	own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
		Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You	ı Did Not List Above		
_	<i>Examp</i> INo	have other property of any kind you did not already list? bles: Season tickets, country club membership Give specific information	?		
54.		he dollar value of all of your entries from Part 7. Write the	at number here		\$0.00
55.		: Total real estate, line 2			\$132.000.00
56.	Part 2	2: Total vehicles, line 5	\$63,675.00		
57.	Part 3	: Total personal and household items, line 15	\$2,750.00		
58.	Part 4	: Total financial assets, line 36	\$145,592.49		
59.	Part 5	i: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	': Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$212,017.49	Copy personal property to	tal \$212,017.49
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$344,017.49

Official Form 106A/B Schedule A/B: Property page 7

		Case 3:18-bk-0	1579-JAF Do	c 1	Filed 05/10/18 Pag	ge 17 of 6	66
Fil	l in this inform	ation to identify your case:					
De	ebtor 1	Robert Kenneth Schmidt	Middle Name		ast Name		
	ebtor 2 ouse if, filing)	Calli Jean Schmidt	Middle Name		ast Name		
Ur	nited States Ban	kruptcy Court for the: MIDD	LE DISTRICT OF FLO	RIDA			
(if k	ase number	4000					Check if this is an amended filing
	fficial For c <mark>hedul</mark> e	e C: The Prope	rty You Cla	im	as Exempt		4/16
For speany fun exe	property you liseded, fill out and enumber (if known each item of pecific dollar amy applicable stands—may be unemption to a pathe applicable stands—	sted on Schedule A/B: Property I attach to this page as many coown). property you claim as exempt tount as exempt. Alternatively attutory limit. Some exemption illimited in dollar amount. How	(Official Form 106A/B) popies of Part 2: Addition To you must specify the y, you may claim the f ns—such as those for wever, if you claim an e value of the propert	as yo nal Pa e amo full fai healt exen	her, both are equally responsible our source, list the property that y ge as necessary. On the top of a punt of the exemption you clair r market value of the property the aids, rights to receive certain aption of 100% of fair market veletermined to exceed that amounts	ou claim as ex ny additional p n. One way o being exemp n benefits, an alue under a	kempt. If more space is pages, write your name and f doing so is to state a sted up to the amount of ad tax-exempt retirement law that limits the
1.	Which set of	exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.		
	You are cla	iming state and federal nonbar	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	☐ You are cla	iming federal exemptions. 11	U.S.C. § 522(b)(2)				
2.	For any prope	erty you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.		
		on of the property and line on hat lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific la	aws that allow exemption
		, ,	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
		lustang GT 98500 miles 2H875275614	\$7,600.00		\$1,000.00	Fla. Stat	t. Ann. § 222.25(1)
		Coupe 2D Engine: 4.6L V8			100% of fair market value, up to any applicable statutory limit)	
	Electrical Wi	t Running. Needs Major ring Done, A New Starter, A And Also Has A Rear eak.	4				

2007 Ford Mustang GT 98500 miles VIN 1ZVFT82H875275614 ——	\$7,600.00		\$1,000.00	Fla. Stat. Ann. § 222.25(1)
Style / Body: Coupe 2D Engine: 4.6L V8 EFI			100% of fair market value, up to any applicable statutory limit	
Currently Not Running. Needs Major Electrical Wiring Done, A New Starter, A New Battery And Also Has A Rear Differential Leak. Line from <i>Schedule A/B</i> : 3.3				
2007 Ford Mustang GT 98500 miles VIN 1ZVFT82H875275614	\$7,600.00		\$1,238.00	Fla. Stat. Ann. § 222.25(4)
Style / Body: Coupe 2D Engine: 4.6L V8 EFI			100% of fair market value, up to any applicable statutory limit	
Currently Not Running. Needs Major Electrical Wiring Done, A New Starter, A New Battery And Also Has A Rear Differential Leak. Line from <i>Schedule A/B</i> : 3.3				
2008 Suzuki Hyabusa 26140 miles VIN JS1GX72A682107265	\$6,800.00		\$700.00	Fla. Const. art. X, § 4(a)(2)
Line from Schedule A/B: 3.4			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

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Robert Kenneth Schmidt Debtor 1 Debtor 2 Calli Jean Schmidt Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 2008 Suzuki Hyabusa 26140 miles Fla. Stat. Ann. § 222.25(4) \$1,818.18 \$6.800.00 VIN JS1GX72A682107265 Line from Schedule A/B: 3.4 100% of fair market value, up to any applicable statutory limit Household: Couch. Mattresses. Fla. Stat. Ann. § 222.25(4) \$1,000.00 \$1,000.00 Dressers, Book Shelves, Dining Room Table, and Chairs, Washer and Dryer, 100% of fair market value, up to any applicable statutory limit Dishes, utensils, plates, cups, misc. other household goods. Line from Schedule A/B: 6.1 Books, Holiday decorations, Family Fla. Stat. Ann. § 222.25(4) \$100.00 \$100.00 Photos, Crib, Mattress, Sheets and other Bedding, Knick Knacks and Kids 100% of fair market value, up to items they have grown out of or any applicable statutory limit Memorabilia. Line from Schedule A/B: 6.2 Electronics: Tvs, Laptop, Xbox 360 Fla. Const. art. X, § 4(a)(2) \$600.00 \$600.00 Location: 6502 Barnes Road South, Jacksonville FL 32216 100% of fair market value, up to Line from Schedule A/B: 7.1 any applicable statutory limit Old sporting equipment - Bats, Gloves, Fla. Const. art. X, § 4(a)(2) \$500.00 \$500.00 Basketballs, Volleyballs, Tennis Balls, П Golf Balls, Softballs, Baseballs, Cleats, 100% of fair market value, up to Bags, Bucket, Basketball Goal, Batting any applicable statutory limit Gloves Line from Schedule A/B: 9.1 Clothing and Apparel Fla. Const. art. X, § 4(a)(2) \$50.00 \$50.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Jewelry: White gold wedding bands, Fla. Stat. Ann. § 222.25(4) \$350.00 \$500.00 Pandora Bracelet, Earrings, Bracelets Location: 6502 Barnes Road South, 100% of fair market value, up to Jacksonville FL 32216 any applicable statutory limit Line from Schedule A/B: 12.1 Jewelry: White gold wedding bands, Fla. Const. art. X, § 4(a)(2) \$150.00 \$500.00 Pandora Bracelet, Earrings, Bracelets Location: 6502 Barnes Road South, 100% of fair market value, up to Jacksonville FL 32216 any applicable statutory limit Line from Schedule A/B: 12.1 Cash on hand Fla. Stat. Ann. § 222.25(4) \$5.00 \$5.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Checking: Checking Account: Vystar Fla. Stat. Ann. § 222.25(4) \$3,478.82 \$3,478.82 Credit Union Acct. No.: 2775 П 100% of fair market value, up to Line from Schedule A/B: 17.4 any applicable statutory limit

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	otor 1 Robert Kenneth Schmidt otor 2 Calli Jean Schmidt			Case number (if known)		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	Savings: Savings Account: Navy Federal Credit Union	\$5.00		\$5.00	Fla. Stat. Ann. § 222.25(4)	
	Acct. No.: 8003 Line from <i>Schedule A/B</i> : 17.5			100% of fair market value, up to any applicable statutory limit		
	Savings: Savings Account: Vystar Credit Union	\$5.00		\$5.00	Fla. Stat. Ann. § 222.25(4)	
	Acct. No.: 6480 Line from <i>Schedule A/B</i> : 17.6	1		100% of fair market value, up to any applicable statutory limit		
	Thrift Savings Plan: TSP through employer	\$10,080.81		100%	Fla. Stat. Ann. § 222.21(2)	
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit		
	Child Support Arrearages: Robert Hunter owes Child Support to the Joint	\$132,000.00		100%	Fla. Stat. Ann. § 222.201; 11 U.S.C. § 522(d)(10)(D)	
	Debtor Line from Schedule A/B: 29.1			100% of fair market value, up to any applicable statutory limit	0.0.0. § 0.22(d)(10)(D)	
3.	Are you claiming a homestead exemption o (Subject to adjustment on 4/01/19 and every 3 ■ No □ Yes. Did you acquire the property covered	years after that for ca	ises fil	,	,	
	□ No □ Yes					
	– 163					

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Fill in this informat	ion to identify you	ır case:				
Debtor 1	Robert Kenneth	Schmidt				
	First Name	Middle Name	Last Name			
Debtor 2	Calli Jean Schmi	dt				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankr	uptcy Court for the:	MIDDLE DISTRICT OF FLORII	DA			
Case number						
(if known)					_	if this is an
					ameno	led filing
Official Form 1	106D					
	-	Who Have Claims	Secure	d by Propert	y	12/15
		If two married people are filing togeth				tion. If more space
		out, number the entries, and attach it				
1. Do any creditors have	ve claims secured by	your property?				
□ No. Check th	s box and submit th	nis form to the court with your other	schedules. Yo	ou have nothing else t	o report on this form.	
Yes. Fill in all	of the information	below.				
	ecured Claims					
			Pr	Column A	Column B	Column C
for each claim. If more	than one creditor has	nore than one secured claim, list the cre a particular claim, list the other creditors cal order according to the creditor's nam	s in Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1 Ally Financia		Describe the property that secures t	the claim:	value of collateral. \$29,455.00	claim \$26,675.00	If any \$2,780.00
Creditor's Name	<u>'</u>	2016 GMC Sierra 1500 42511		Ψ20,100.00	Ψ20,070.00	Ψ2,7 00.00
		VIN 1GTR1LEC8GZ232473				
		Style / Body: Double Cab 4D B	Engine:			
Attn: Bankrup	otcy	5.3L V8 DI				
Po Box 3809	-	As of the date you file, the claim is: apply.	Check all that			
Bloomington,	MN 55438	☐ Contingent				
Number, Street, City	y, State & Zip Code	☐ Unliquidated				
Who owes the debt?	Charle and	☐ Disputed Nature of lien. Check all that apply.				
Debtor 1 only	Check one.	_		sure d		
Debtor 2 only		An agreement you made (such as recar loan)	mongage or sec	curea		
■ Debtor 1 and Debto	r 2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)			
At least one of the o	•	☐ Judgment lien from a lawsuit	,			
☐ Check if this claim		Other (including a right to offset)	Purchase M	Ioney Security		
community debt		— Other (including a right to onset)		, ,		
	Opened					
	03/16 Last					
	Active					
Date debt was incurre	ed 2/20/18	Last 4 digits of account numl	ber 1715			
				400.000.00	# 00 000 00	40.700.00
2.2 Ally Financial	<u> </u>	Describe the property that secures to 2016 GMC Acadia SLE 42511		\$29,322.00	\$22,600.00	\$6,722.00
oroanor o riamo		VIN 1GKKRNED3GJ256357	IIIIes			
		Style / Body: SUV 4D Engine:	3.6L V6			
Attn: Bankrup	otcv	DI				
Po Box 3809		As of the date you file, the claim is: apply.	Check all that			
Bloomington,	MN 55438	Contingent				
Number, Street, City	y, State & Zip Code	☐ Unliquidated				
		Disputed				
Who owes the debt?	' Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as recar loan)	mortgage or sec	cured		
Debtor 2 only			ahaniala !!\			
■ Debtor 1 and Debto	r 2 only	☐ Statutory lien (such as tax lien, med	crianic's lien)			

Official Form 106D

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Debtor 1 Robert Kenneth Schmidt		Ca	ase number (if know)		
First Name Middle N	ame Last Name	<u> </u>			
Debtor 2 Calli Jean Schmidt First Name Middle N	ame Last Name	_			
FIIST Name Middle N	arie Last Name				
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)	Purchase Moi	ney Security		
community debt					
Opened					
03/16 Last					
Active					
Date debt was incurred 4/12/18	Last 4 digits of account num	ber 2956			
	_				
2.3 Bank of America	Describe the property that secures	the claim:	\$5,466.00	\$132,000.00	\$5,466.00
Creditor's Name	6502 Barnes Rd. South Jacks	sonville,			
	FL 32216 Duval County Cou				
4909 Savarese Circle	As of the date you file, the claim is:	01 1 1111			
FI1-908-01-50	apply.	Check all that			
Tampa, FL 33634	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as	mortgage or secure	ed		
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the debtors and another	Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)				
community debt		-			
Opened					
06/08 Last Active					
Date debt was incurred 9/27/13	Last 4 digits of account num	her 4092			
Date debt was incurred 9/21/13					
2.4 Cig Financial	Describe the property that secures	the claim:	\$5,362.00	\$7,600.00	\$0.00
Creditor's Name	2007 Ford Mustang GT 9850		ψ0,002.00	Ψ1,000.00	Ψ0.00
	VIN 1ZVFT82H875275614	o miles			
	Style / Body: Coupe 2D Engir	ne: 4.6L			
	V8 EFI				
	Currently Not Running. Need:	s Major			
	Electrical Wiring Done, A Nev				
	A New Battery And Also Has	A Rear			
	Differential Leak. As of the date you file, the claim is:				
6 Executive Circle Ste 100	apply.	Check all that			
Irvine, CA 92614	Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as	mortgage or secure	ed		
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	,			
☐ Check if this claim relates to a	Other (including a right to offset)	Purchase Moi	ney Security		
community debt	Janes (moreamly a right to offsor)		•		
Onanad					
Opened 09/15 Last					
Active					
Date debt was incurred 1/15/18	Last 4 digits of account num	ber 4415			
	-				

Official Form 106D

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Debtor 1 Robert Kenneth Schmidt	Case number (if know)					
Debtor 2 Calli Jean Schmidt First Name Middle N Galli Jean Schmidt First Name Middle N		_				
. not taine	2251 (12.11)					
2.5 Ditech	Describe the property that secures the claim	:\$192,122.00	\$132,000.00	\$60,122.00		
Creditor's Name Attn: Bankruptcy	6502 Barnes Rd. South Jacksonville, FL 32216 Duval County County					
Po Box 6172 Rapid City, SD 57709	As of the date you file, the claim is: Check all the apply. Contingent	nat				
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage car loan)	or secured				
■ Debtor 1 and Debtor 2 only	\square Statutory lien (such as tax lien, mechanic's li	en)				
$\hfill\square$ At least one of the debtors and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim relates to a community debt	Other (including a right to offset)	ntional Real Estate Mortgage				
Opened 04/07 Last Active 5/08/17	Last 4 digits of account number 7	819				
-						
trying to collect from you for a debt you o	oe notified about your bankruptcy for a debt that owe to someone else, list the creditor in Part 1, it you listed in Part 1, list the additional creditor his page.	and then list the collection agenc	y here. Similarly, if you	u have more		
Name, Number, Street, City, State & Anthony J. Maniscalco, Esq.	Zip Code C	on which line in Part 1 did you enter t	he creditor? 2.3			
Cooling & Winter, LLC 7901 SW 6th Ct, Suite 310 Fort Lauderdale, FL 33324	L	ast 4 digits of account number				
Name, Number, Street, City, State & Cooling & Winter, LLC	Zip Code C	on which line in Part 1 did you enter t	he creditor? 2.3			
7901 SW 6th Court Suite 310 Fort Lauderdale, FL 33324	L	ast 4 digits of account number				
Name, Number, Street, City, State & Princy Valiathodathil, Esq.	Zip Code C	on which line in Part 1 did you enter t	he creditor? 2.5			
Tromberg Law Group, PA 1515 S Federal Hwy Ste 100 Boca Raton, FL 33432-7404)	ast 4 digits of account number				

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	Case 0.10 BK 010	10 0/11 200 1 1 11cd 00/10/10 1 age 20 c	71 00
Fill in thi	s information to identify your case:		
Debtor 1	Robert Kenneth Schmidt		
		e Name Last Name	
Debtor 2	Calli Jean Schmidt		
(Spouse if, f	iling) First Name Middle	e Name Last Name	
United St	ates Bankruptcy Court for the: MIDDLE	DISTRICT OF FLORIDA	
Case nur	mber		
(if known)			☐ Check if this is an
			amended filing
Official	Form 106E/F		
	ule E/F: Creditors Who Hav	a Unecoured Claims	12/15
		creditors with PRIORITY claims and Part 2 for creditors with NONPRIOR	
Schedule (Schedule I left. Attach	G: Executory Contracts and Unexpired Leases D: Creditors Who Have Claims Secured by Pro	esult in a claim. Also list executory contracts on Schedule A/B: Propert (Official Form 106G). Do not include any creditors with partially secured perty. If more space is needed, copy the Part you need, fill it out, number e no information to report in a Part, do not file that Part. On the top of a	d claims that are listed in er the entries in the boxes on the
Part 1:	List All of Your PRIORITY Unsecured C	laims	
1. Do an	y creditors have priority unsecured claims aga	inst you?	
■ No	o. Go to Part 2.		
☐ Ye	s.		
Part 2:	List All of Your NONPRIORITY Unsecur	ed Claims	
_	y creditors have nonpriority unsecured claims b. You have nothing to report in this part. Submit the		
■ Ye	s.		
unsec	ured claim, list the creditor separately for each cla one creditor holds a particular claim, list the other c	alphabetical order of the creditor who holds each claim. If a creditor has a lim. For each claim listed, identify what type of claim it is. Do not list claims all treditors in Part 3.If you have more than three nonpriority unsecured claims fi	ready included in Part 1. If more
			Total claim
4.1 E	Badcock	Last 4 digits of account number	\$800.00
	Ionpriority Creditor's Name		
	Attn: Legal Department P.O. Box 232	When was the debt incurred?	
	/ulberry, FL 33860		
	lumber Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
v	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
d	ebt	\square Obligations arising out of a separation agreement or divorce that you	did not
_	s the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Washer/Dryer (Badcock)	

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Debtor 2	Robert Kenneth Schmidt Calli Jean Schmidt		Case number (if know)					
4.2	Capital One	Last 4 digits of account number	2485	\$2,577.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 08/15 Last Active 3/29/18					
	Salt Lake City, UT 84130	when was the debt incurred:	3/29/10					
_	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	Student loans						
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	☐ Yes ☐ Other. Specify Credit (
	Capital One	Last 4 digits of account number	2272	\$235.00				
	Nonpriority Creditor's Name Attn: Bankruptcy		Opened 07/15 Last Active					
	Po Box 30285	When was the debt incurred?	2/22/18					
_	Salt Lake City, UT 84130							
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply					
	Who incurred the debt? Check one. Debtor 1 only							
	_	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	l alaim.					
	At least one of the debtors and another	Student loans	a Ciaiiii.					
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa						
	Is the claim subject to offset?	report as priority claims						
	■ No	☐ Debts to pension or profit-sharin						
	Yes	Other. Specify Credit Card						
	Capital One	Last 4 digits of account number	8814	\$0.00				
	Nonpriority Creditor's Name		Opened 11/06 Lept Active					
	Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 11/06 Last Active 10/31/08					
	Salt Lake City, UT 84130							
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	■ Debtor 2 only □ Unliquidated							
	Debtor 1 and Debtor 2 only	Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt	☐ Student loans						
	dept Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	□ Yes	■ Other. Specify Credit Card						
	— 163	Other. Specify						

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Debtor Debtor	1 Robert Kenneth Schmidt 2 Calli Jean Schmidt		Case number (if know)	
4.5	Mg Credit	Last 4 digits of account number	8407	\$600.00
	Nonpriority Creditor's Name 5115 San Juan Ave Jacksonville, FL 32210	When was the debt incurred?	Opened 4/01/15	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify 01 Baileys 0	Gym Inc	
4.6	Mg Credit Nonpriority Creditor's Name	Last 4 digits of account number	8406	\$409.00
	5115 San Juan Ave Jacksonville, FL 32210	When was the debt incurred?	Opened 4/01/15	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	1 claim:	
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Student loans	. oldiii.	
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other Specify 01 Baileys 0		
4.7	News Faderal Oathsian		0.407	ФГ 000 00
4.7	Navy Federal Cr Union Nonpriority Creditor's Name	Last 4 digits of account number	9437	\$5,006.00
	Attn: Bankruptcy Po Box 3000	When was the debt incurred?	Opened 07/01 Last Active 1/03/18	
	Merrifield, VA 22119 Number Street City State Zlp Code	As of the date you file, the claim		
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community ☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card		

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Debtor Debtor	1 Robert Kenneth Schmidt2 Calli Jean Schmidt		Case number (if know)			
				.		
4.8	North Cash Nonpriority Creditor's Name P.O. Box 498	Last 4 digits of account number When was the debt incurred?		\$1,200.00		
	Hays, MT 59527					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	No	Debts to pension or profit-sharir	on plans, and other similar debts			
	☐ Yes					
	la res	■ Other. Specify Payday loan	<u> </u>			
4.9	Plain Green Loans	Last 4 digits of account number	3089	\$0.00		
	Nonpriority Creditor's Name	_		Ψ0.00		
	93 Mack Road, Suite 600		Opened 11/14/16 Last Active			
	Po Box 270	When was the debt incurred?	3/31/18			
	Box Elder, MT 59521 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	•				
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	■ Other. Specify Unsecured				
4.1 0	Professional Debt Mediation	Last 4 digits of account number	0001	\$175.00		
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	Opened 08/15			
	7948 Baymeadows Way, 2nd Floor					
	Jacksonville, FL 32256	=				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	IS: Check all that apply			
	Debtor 1 only	O continuent				
	■ Debtor 2 only	☐ Contingent☐ Unliquidated				
	_	_ '				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:			
	At least one of the debtors and another	Student loans	u Julii			
	Check if this claim is for a community debt		eration agreement or divorce that you did not			
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	☐ Yes	■ Other. Specify Collection A	attorney David Gray Plumbing05			

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Debtor Debtor	1 Robert Ko 2 Calli Jean	enneth Schmidt n Schmidt		Case r	number (_{if know})	
4.1	Us Dept Of Educati	Ed/Great Lakes Higher	Last 4 digits of account number	8581		\$27,455.00
<u>.</u>	Nonpriority Cre	editor's Name	Last 4 digits of account number			Ψ21,100.00
	Attn: Bankr	uptcy national Lane	When was the debt incurred?	Oper 3/27/	ned 06/11 Last Active /18	
-		City State Zlp Code	As of the date you file, the claim	s: Check	k all that apply	
	Who incurred	the debt? Check one.				
	Debtor 1 or	nly	☐ Contingent			
	Debtor 2 or	nly	☐ Unliquidated			
		nd Debtor 2 only	☐ Disputed			
		e of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	_	nis claim is for a community	Student loans			
	debt	ubject to offset?	Obligations arising out of a separeport as priority claims	ration ag	greement or divorce that you did n	ot
	No		Debts to pension or profit-sharin	g plans,	and other similar debts	
	☐ Yes		Other. Specify	01 ,		
	□ res		Educational			<u> </u>
	5 0.	5.1/O (1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.				
4.1	Us Dept Of Educati Nonpriority Cre	Ed/Great Lakes Higher	Last 4 digits of account number	8581		\$17,312.00
	Attn: Bankr			Oper	ned 06/11 Last Active	
		national Lane	When was the debt incurred?	3/08/	18	
	Madison, W	/I 53704 City State Zlp Code	As of the date yes file the claim	a. Chaal	k all that apply	
		the debt? Check one.	As of the date you file, the claim	s: Check	к ан тпат арріу	
	Debtor 1 or		☐ Contingent			
	■ Debtor 2 or	•	☐ Unliquidated			
		•	☐ Disputed			
	_	nd Debtor 2 only	Type of NONPRIORITY unsecured	d claim:		
	_	e of the debtors and another	Student loans			
	debt	nis claim is for a community	☐ Obligations arising out of a separeport as priority claims	ration ag	greement or divorce that you did n	ot
	No	ubject to onset?	Debts to pension or profit-sharin	a nlans	and other similar debts	
	■ No		☐ Other. Specify	g pians,	and other similar debts	
	□ Yes		Educational			
Part 3:	List Other	rs to Be Notified About a Debt				
5. Use th is tryin have r	is page only if ng to collect fro nore than one	you have others to be notified abo om you for a debt you owe to some	ut your bankruptcy, for a debt that y one else, list the original creditor in ou listed in Parts 1 or 2, list the addi	Parts 1	or 2, then list the collection age	ency here. Similarly, if you
Part 4:	Add the A	mounts for Each Type of Unse	cured Claim			
6. Total t		f certain types of unsecured claims	. This information is for statistical r	eporting	purposes only. 28 U.S.C. §159.	Add the amounts for each
					Total Claim	
,	ба. Г otal	Domestic support obligations		6a.		.00
cla	aims					
from P		•	<u> </u>	6b.		.00_
	6c. 6d.	·	ured claims. Write that amount here.	6c. 6d.		. <u>00</u> .00
		Tarrey and all out of priority and ook				
	6e.	Total Priority. Add lines 6a throug	h 6d.	6e.	\$0	.00_
					Total Claim	
	6f.	Student loans		6f.	\$ 44,767.	.00
1	Γotal					

Official Form 106 E/F

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Debtor 1 Robert Kenneth Schmidt
Calli Jean Schmidt

Case	number	(if know)	
Ouco	Harrison	(II KIIOW)	

_				, ,	
claims from Part 2		Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Add all other nonpriority unsecured claims. Write that amount	6g. 6h. 6i.	\$	0.00 0.00 11.002.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	55,769.00

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Fill in this information to identify your case:					
Robert Kenneth Sc					
First Name	Middle Name	Last Name			
Debtor 2 Calli Jean Schmidt					
First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA					
					Check if this is an amended filing
	Robert Kenneth Sci First Name Calli Jean Schmidt First Name	Robert Kenneth Schmidt First Name Middle Name Calli Jean Schmidt First Name Middle Name	Robert Kenneth Schmidt First Name Middle Name Last Name Calli Jean Schmidt First Name Middle Name Last Name	Robert Kenneth Schmidt First Name Middle Name Last Name Calli Jean Schmidt First Name Middle Name Last Name	Robert Kenneth Schmidt First Name Middle Name Last Name Calli Jean Schmidt First Name Middle Name Last Name

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have the , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3			<u> </u>		
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.5	City		Oldio	ZII OOGC	
-	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	

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Fill in this	s information to identify y	our case:			
Debtor 1	Robert Kennet		Loot Name		
Debtor 2	Calli Jean Sch	Middle Name midt	Last Name		
(Spouse if, fili		Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the	ne: MIDDLE DISTRICT C	F FLORIDA		
Case num (if known)	nber			☐ Check if this is an amended filing	
Officia	l Form 106H				
	dule H: Your C	odebtors		12/15	
people are fill it out, a	e filing together, both are and number the entries in	equally responsible for su	pplying correct information the Additional Page to	s complete and accurate as possible. If two married on. If more space is needed, copy the Additional Page o this page. On the top of any Additional Pages, write	! ,
1. Do	you have any codebtors	? (If you are filing a joint case	e, do not list either spouse a	as a codebtor.	
■ No					
Arizor	na, California, Idaho, Louisi . Go to line 3.	you lived in a community ana, Nevada, New Mexico, I spouse, or legal equivalent I	Puerto Rico, Texas, Washir	1? (Community property states and territories include ngton, and Wisconsin.)	
in line Form	e 2 again as a codebtor o	nly if that person is a guar	antor or cosigner. Make s	if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offici 6G). Use Schedule D, Schedule E/F, or Schedule G to t	al
	Column 1: Your codebtor Name, Number, Street, City, State a	and ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:	
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street City	State	ZIP Code	_	
	· 				_
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			-	
	City	State	ZIP Code		

Fill in this informa	ation to identify your case:	
Debtor 1	Robert Kenneth Schmidt	
Debtor 2 (Spouse, if filing)	Calli Jean Schmidt	
United States Bar	nkruptcy Court for the: MIDDLE DISTRICT OF FLORIDA	
Case number (If known)		Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Fo	orm 106I	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. If you have more than one job, Employed Employed **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation Dispatcher Manager Include part-time, seasonal, or Defense Finance and Acct self-employed work. Hometown Threads **Employer's name** Services Occupation may include student or homemaker, if it applies. **Employer's address** Room 1907 240 East 9th Street Atlanta, GA Cleveland, OH 44199 How long employed there? 3 years and 6 months 6 years **Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 4,599.90 \$ 3,159.72

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 4,599.90 \$ 3,159.72

Debtor 1 Debtor 2		Robert Kenneth Schmidt Calli Jean Schmidt	_	C	Case number (if known)							
					For De	ebtor 1				Debtor	· 2 or spouse	
	Cop	by line 4 here	4.		\$	4,59	9.90)	\$_	3	,159.72	-
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	70	5.10)	\$		461.35	;
	5b.	Mandatory contributions for retirement plans	5b.		\$	16	1.22	2	\$		0.00	<u> </u>
;	5c.	Voluntary contributions for retirement plans	5c.		\$	18	3.2°	1	\$		0.00)
	5d.	Required repayments of retirement fund loans	5d.		\$		0.00	_	\$_		0.00	_
	5e.	Insurance	5e.		\$		0.26	_	\$_		0.00	_
	5f.	Domestic support obligations	5f.		\$		0.00	_	\$_		0.00	_
	5g.	Union dues	5g.		\$		0.00	_	. \$ _		0.00	_
	5h.	Other deductions. Specify: FEGLI	5h		\$		5.28	_	-		0.00	_
		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,60		_	\$_		461.35	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,99	4.83	3_	\$_	2	,698.37	, —
	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$		0.00	1	\$		0.00	1
	8b.	Interest and dividends	8b.		\$		0.00		\$_		0.00	_
	8c. 8d.	Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c. 8d.		\$ \$		0.00	_	\$_ \$_		0.00	_
	8e.	Social Security	8e.		\$		0.00	_	\$_		0.00	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	ce 8f. 8g.		\$ \$		0.00	<u> </u>	\$_ \$		0.00	<u> </u>
	8h.	Other monthly income. Specify:	8h	+	\$		0.00	_	· ·		0.00	_
				_					_			_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	<u> </u>	1,33	2.00)	\$_		0.0	0
10.	Cal	culate monthly income. Add line 7 + line 9.	10. \$;	4,3	326.83	+	\$	2,	698.37	= \$	7,025.20
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					1 [
	Incli othe Do i	te all other regular contributions to the expenses that you list in <i>Schedul</i> ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no cify:	ır deper								e J. +\$	0.00
,		If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certilies								12.	\$	7,025.20
											Combi	
13.	Do : ■	you expect an increase or decrease within the year after you file this form	n?								month	ly income
		Yes. Explain:										

	in this information to identify your case:							
Deb	Robert Kenneth Schmidt	_		if this is: an amended filing				
	otor 2 Calli Jean Schmidt		A supplement showing postpetition chapter 13 expenses as of the following date:					
Unit	ted States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA	Α	N	MM / DD / YYYY				
	se number known)							
S	fficial Form 106J chedule J: Your Expenses as complete and accurate as possible. If two married people a	ore filing together, be	th are equa	Ilu roonansibla fa	12/15			
info	ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question.							
	tt 1: Describe Your Household							
1.	Is this a joint case? ☐ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?							
	■ No □ Yes. Debtor 2 must file Official Form 106J-2, Expense	es for Separate Housel	<i>hold</i> of Debto	or 2.				
2.	Do you have dependents? ☐ No							
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?			
	Do not state the dependents names.	Step Son		19	□ No ■ Yes			
		Step Son		20	□ No ■ Yes □ No			
					☐ Yes ☐ No			
3.	Do your expenses include expenses of people other than yourself and your dependents?				☐ Yes			
Est	Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless penses as of a date after the bankruptcy is filed. If this is a supplicable date.							
the	clude expenses paid for with non-cash government assistance a value of such assistance and have included it on <i>Schedule I:</i> fficial Form 106I.)			Your expe	enses			
4.	The rental or home ownership expenses for your residence. payments and any rent for the ground or lot.	Include first mortgage	4. \$		810.00			
	If not included in line 4:							
	4a. Real estate taxes		4a. \$		0.00			
	4b. Property, homeowner's, or renter's insurance		4b. \$		118.58			
	Home maintenance, repair, and upkeep expenses Homeowner's association or condominium dues		4c. \$ 4d. \$		275.00 0.00			
5.	Additional mortgage payments for your residence, such as h	ome equity loans	5. \$		0.00			

Debtor 1	Robert Kenneth Schmidt			
ebtor 2	Calli Jean Schmidt	Case num	ber (if known)	
			_	
	ties:	0-	Φ.	050.00
6a.	Electricity, heat, natural gas	6a.	·	250.00
6b.	Water, sewer, garbage collection	6b.	·	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	500.00
6d.	Other. Specify:	6d.	*	0.00
	d and housekeeping supplies	7.	· —	1,200.00
_	dcare and children's education costs	8.	\$	100.00
	hing, laundry, and dry cleaning	9.	\$	275.00
	sonal care products and services	10.	\$	100.00
	lical and dental expenses	11.	\$	300.00
	nsportation. Include gas, maintenance, bus or train fare.	12.	\$	450.00
	not include car payments. ertainment, clubs, recreation, newspapers, magazines, and books	13.	·	150.00
	ritable contributions and religious donations	14.		
	ritable contributions and religious donations Irance.	14.	Φ	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.	*	254.00
	Other insurance. Specify:	15d.	·	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	_	·	0.00
Spe	cify: FITW from Retirement Pay	16.	\$	20.00
	allment or lease payments: Car payments for Vehicle 1	17a.	¢	620.05
	Car payments for Vehicle 2	17a. 17b.	·	639.05 631.75
	Other. Specify: CIG Financial	17b. 17c.		458.00
	Other. Specify: Badcock	— 17d. 17d.		110.00
	r payments of alimony, maintenance, and support that you did not report as	_ ''u.	Ψ	110.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 1061).	18.	\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
Spe		19.		
	er real property expenses not included in lines 4 or 5 of this form or on Sched			
20a.	Mortgages on other property	20a.	· ·	0.00
20b.	Real estate taxes	20b.	·	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
. Oth	er: Specify: SBP costs taken from Retirement	21.	+\$	78.71
Mis	c. expenses	_	+\$	400.00
Calc	culate your monthly expenses			
	Add lines 4 through 21.		\$	7,120.09
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	7,120.00
	Add line 22a and 22b. The result is your monthly expenses.		\$	7 100 00
220.	Aud line 22a and 22b. The result is your monthly expenses.		Ψ	7,120.09
	culate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.		7,025.20
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	7,120.09
23c.	Subtract your monthly expenses from your monthly income.	22.5	· ·	-94.89
	The result is your monthly net income.	23c.	\$	-54.05
1. Do v	ou expect an increase or decrease in your expenses within the year after you	file this	s form?	
	example, do you expect to finish paying for your car loan within the year or do you expect your n			e or decrease because of a
	fication to the terms of your mortgage?	5 5-1		
	lo.			
ΠY	es. Explain here:			

Fill in t	his informa	ation to identify your	case:				
Debtor 1 Robert Kenneth Schmidt							
		First Name	Middle Name	Las	Name		
Debtor	2	Calli Jean Schmidt					
(Spouse if	f, filing)	First Name	Middle Name	Las	Name		
United \$	States Bank	cruptcy Court for the:	MIDDLE DISTRICT O	F FLORIDA			
Case no	umber						
(if known)							☐ Check if this is an amended filing
Dec If two m You musobtainin	laration arried peoplest file this fing money of	ple are filing together form whenever you fil or property by fraud in U.S.C. §§ 152, 1341, 1	connection with a ba	oonsible for s	upplying correct	information. king a false stat	tement, concealing property, or 00, or imprisonment for up to 20
Die	d you pay o	or agree to pay some	one who is NOT an att	orney to help	you fill out bankı	ruptcy forms?	
	No						
	Yes. Na	me of person					nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
		of perjury, I declare are are	that I have read the su	ımmary and s	chedules filed wi	th this declarati	on and
Х	/s/ Rober	t Kenneth Schmidt		Х	/s/ Calli Jean So	chmidt	
		enneth Schmidt			Calli Jean Schn		
	Signature	of Debtor 1			Signature of Debt	tor 2	
	Date Ma	ay 10, 2018			Date May 10,	2018	

	n this infor	nation to identify you	r casa:									
Debtor 1		Robert Kenneth S	Middle Name	Last Name								
Deb	tor 2	Calli Jean Schmid	dt									
	ise if, filing)	First Name	Middle Name	Last Name								
Unit	ed States Ba	nkruptcy Court for the:	MIDDLE DISTRICT OF F	LORIDA								
Cas	e number											
(if kno	own)					heck if this is an mended filing						
~ "												
	icial Fo		Affaire for Individ	duals Eiling for B	ankruntov	414.6						
			Affairs for Individ			4/16						
					equally responsible for sup y additional pages, write you							
num	ber (if know	n). Answer every que	stion.									
Part	1: Give I	Details About Your Ma	arital Status and Where You	Lived Before								
1.	What is you	r current marital statu	ıs?									
	■ Married□ Not ma											
2.	During the last 3 years, have you lived anywhere other than where you live now?											
	_	,	•	·								
	NoYes. List all of the places you lived in the last 3 years. Do not include where you live now.											
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there						
					ity property state or territory							
	_	,	, ,	,		,						
	■ No □ Yes Ma	ake sure vou fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H)								
	103.100	ake sure you iiii out oor	icadic 11. Tour Godebiors (G	modification room.								
Part	2 Expla	in the Sources of You	r Income									
	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?						
	□ No											
	 _	I in the details.										
			Deblema		Dalifar 0							
			Debtor 1		Debtor 2							
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)						
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$20,395.82	■ Wages, commissions, bonuses, tips	\$11,666.64						
			☐ Operating a business		☐ Operating a business							

Official Form 107

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		alli Jean Scl			Ca	se number (if known)	
				Dobton 4		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of incor Check all that app	
		endar year: o December 3	31, 2017)	■ Wages, commissions, bonuses, tips	\$61,831.00	☐ Wages, comm bonuses, tips	nissions, \$0.00
				☐ Operating a business		Operating a bu	usiness
		ndar year bef o December 3		■ Wages, commissions, bonuses, tips	\$72,879.00	☐ Wages, comm bonuses, tips	nissions, \$0.00
				☐ Operating a business		☐ Operating a bu	usiness
	List each	-	ne gross inco	se and you have income that			
				Dalitand		D-1-10	
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.	me Gross income (before deductions and exclusions)
		ry 1 of currer ı filed for ban		Military retirement pay	\$6,660.00		
		endar year: o December 3	31, 2017)	Military retirement pay	\$8,979.00		
		ndar year bef o December 3		Military retirement pay	\$9,476.00		
Part	t 3: Li	st Certain Pa	yments You	Made Before You Filed for	Bankruptcy		
	Are eith □ No.	Neither De	btor 1 nor D	's debts primarily consume bebtor 2 has primarily cons personal, family, or househo	umer debts. Consumer deb	ots are defined in 11 U	J.S.C. § 101(8) as "incurred by an
		During the No.	Go to line 7				? nents and the total amount you
			paid that cr		nts for domestic support obl this bankruptcy case.	igations, such as child	d support and alimony. Also, do
	■ Yes	Debtor 1 o	r Debtor 2 o	or both have primarily consore you filed for bankruptcy, c	umer debts.		
		■ No.	Go to line 7				
		□ Yes	List below e	each creditor to whom you pa			ou paid that creditor. Do not so, do not include payments to an
	Credito	or's Name and	l Address	Dates of payme	ent Total amount	Amount you still owe	Was this payment for

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	btor 2 Calli Jean Schmidt		Cas	e number (if known)		
7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. It alimony.	artners; relatives of any ger n control, or owner of 20% of	neral partners; partne or more of their voting	erships of which yo g securities; and a	u are a genera ny managing a	al partner; corporations gent, including one for
	■ No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
В.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos	<i>.</i> , , , , , , , , , , , , , , , , , , ,	ments or transfer a	ny property on a	ccount of a de	ebt that benefited an
	NoYes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment
	rt 4: Identify Legal Actions, Repossession		paid	Still Owe	moidae orea	nor o name
	modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Bank of America, N.A. vs Robert K. Schmidt 14-CC-13936	Nature of the case Collection of Debt	Court or agency Duval County C 501 W Adams S Jacksonville, FL	Street	Status of th Pending On appe Conclude	al ed
	DITECH Financial LLC F/K/A Green Tree Servicing LLC., vs. Calli Jean Schmidt a/k/a Callie Schmidt a/k/a Calli J. Schmidt; and Robert K. Schmidt 2017-CA-006797	Foreclosure	Duval County C 501 W Adams S Jacksonville, FL	Street		al
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.	w.	erty repossessed, f		shed, attached	
	Creditor Name and Address	Describe the Property Explain what happene	d	Date		Value of the property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No Yes. Fill in the details.		luding a bank or fir	nancial institution	n, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amount
				Lanoi		

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	otor 1 Robert Kenneth Schmidt Calli Jean Schmidt	Case number	「 (if known)	
12.	Within 1 year before you filed for bankruptcy, court-appointed receiver, a custodian, or anoton No	was any of your property in the possession of an ther official?	assignee for the bene	efit of creditors, a
	☐ Yes			
Par	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy ■ No □ Yes. Fill in the details for each gift.	, did you give any gifts with a total value of more	than \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankruptcy ■ No □ Yes. Fill in the details for each gift or contrib	r, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	or gambling? ■ No □ Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any	•	
	how the loss occurred Inclu	cribe any insurance coverage for the loss de the amount that insurance has paid. List pending rance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prepa	did you or anyone else acting on your behalf pay ring a bankruptcy petition? ers, or credit counseling agencies for services require		rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Law Offices of Sacks & Sacks, P.A. 1646 Emerson Street, Suite B Jacksonville, FL 32207 Melanie@sacksandsackslaw.com	Attorney Fees \$2,012.00 for Attorney fee;s and \$488.00 for Costs	April 6, 2018	\$2,500.00
	Urgent Credit Counseling 219 SW Stark Street Suite 200 Portland, OR 97204 www.urgentco.com	Certificate of Credit Counseling	April 26, 2018	\$20.00

	otor 1 Robert Kenneth Schmidt otor 2 Calli Jean Schmidt				Case numbe	「 (if known)	
	Within 1 year before you filed for bar promised to help you deal with your Do not include any payment or transfer	creditors o	r to make payments			or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid Address		Description and v transferred	alue of any prop	perty	Date payment or transfer was made	Amount o paymen
	Within 2 years before you filed for be transferred in the ordinary course of Include both outright transfers and transinclude gifts and transfers that you have No	your busing sfers made	ness or financial affa as security (such as t	irs? ne granting of a s			
	Yes. Fill in the details.						
	Person Who Received Transfer Address Person's relationship to you		Description and v property transferr		payment	e any property or is received or debts xchange	Date transfer was made
	Within 10 years before you filed for beneficiary? (These are often called a No Yes. Fill in the details.			y property to a :	self-settled t	rust or similar device	of which you are a
	Name of trust		Description and v	alue of the prop	erty transfe	rred	Date Transfer was
20.	Within 1 year before you filed for bar sold, moved, or transferred? Include checking, savings, money means houses, pension funds, cooperative No Yes. Fill in the details.	nkruptcy, w arket, or ot	ere any financial ac	counts or instru	iments held of deposit; s		,
	Name of Financial Institution and Address (Number, Street, City, State and ZIF Code)		st 4 digits of count number	Type of accou instrument	c m	ate account was losed, sold, noved, or ansferred	Last balance before closing o transfe
	Do you now have, or did you have we cash, or other valuables? No Yes. Fill in the details.	ithin 1 year	before you filed for	bankruptcy, an	y safe depos	sit box or other depos	itory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIF	Code)	Who else had acc Address (Number, State and ZIP Code)		Describe the	e contents	Do you still have it?
	Have you stored property in a storag	e unit or pl	ace other than your	home within 1	year before y	ou filed for bankrupto	cy?
	Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIF	Code)	Who else has or h to it? Address (Number, State and ZIP Code)		Describe the	e contents	Do you still have it?

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	tor 1 Robert Kenneth Schmidt tor 2 Calli Jean Schmidt		Case number (if known)	
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
	Armadillo Storage 4034 University Blvd Jacksonville, FL 32216	Robert Kenneth Schmidt and Calli Jean Schmidt	Books, Holiday decorations, Family Photos, Crib, Matress, Sheets and other Bedding, Knick Knacks and Kids items they have grown out of or Memorabilia.	□ No ■ Yes
Par	9: Identify Property You Hold or Control for S	Someone Else		
23.	Do you hold or control any property that someon for someone.	ne else owns? Include any prop	erty you borrowed from, are storing for	, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	10: Give Details About Environmental Informa	tion		
For	the purpose of Part 10, the following definitions a	apply:		
	Environmental law means any federal, state, or I toxic substances, wastes, or material into the air regulations controlling the cleanup of these sub	r, land, soil, surface water, grou		
	Site means any location, facility, or property as o to own, operate, or utilize it, including disposal s		al law, whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an environmental hazardous material, pollutant, contaminant, or s		us waste, hazardous substance, toxic s	ubstance,
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of wh	en they occurred.	
24.	Has any governmental unit notified you that you	may be liable or potentially liab	le under or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State & ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	NoYes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State & ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	trative proceeding under any en	vironmental law? Include settlements a	nd orders.
	No Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case

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	otor 1 otor 2	Robert Kenneth Schmidt Calli Jean Schmidt		Case	number (if known)
Par	t 11:	Give Details About Your Business or	Connections to Any Business		
27.	With	in 4 years before you filed for bankrup	tcy, did you own a business or have a	ny of th	e following connections to any business?
		☐ A sole proprietor or self-employed	in a trade, profession, or other activity	, either	full-time or part-time
		☐ A member of a limited liability comp	pany (LLC) or limited liability partnersh	nip (LLF	P)
		☐ A partner in a partnership			
		☐ An officer, director, or managing ex	secutive of a corporation		
		☐ An owner of at least 5% of the votin	ng or equity securities of a corporation		
		No. None of the above applies. Go to	Part 12.		
		Yes. Check all that apply above and fil	I in the details below for each busines	s.	
	Bus	iness Name	Describe the nature of the business	E	Employer Identification number
		ress ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security number or ITIN.
					Dates business existed
28.		in 2 years before you filed for bankrup cutions, creditors, or other parties.	tcy, did you give a financial statement	to anyo	one about your business? Include all financial
	_	No Yes. Fill in the details below.			
		le ress ber, Street, City, State and ZIP Code)	Date Issued		
Par	t 12:	Sign Below			
are with	true a ı a baı		false statement, concealing property,	or obta	clare under penalty of perjury that the answers aining money or property by fraud in connection , or both.
		rt Kenneth Schmidt	/s/ Calli Jean Schmidt		
		Kenneth Schmidt e of Debtor 1	Calli Jean Schmidt Signature of Debtor 2		
			•		
Dat	e <u>I</u> V	lay 10, 2018	DateMay 10, 2018		
Did ■ N □ Y	lo	ttach additional pages to Your Statem	ent of Financial Affairs for Individuals	Filing fo	or Bankruptcy (Official Form 107)?
	you p	ay or agree to pay someone who is no	ot an attorney to help you fill out bankr	uptcy fo	orms?
□ Y	es. N	ame of Person Attach the <i>Bankru</i>	uptcy Petition Preparer's Notice, Declarat	ion, and	Signature (Official Form 119).

Debtor 1	Robert Kenneth	Schmidt Middle Name	Last Name	
Debtor 2	Calli Jean Schn	nidt		
Spouse if, filing)	First Name	Middle Name	Last Name	
Case number				
Case number _				☐ Check if this is ar
,				amended filing

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

identify the cre	ditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Al	ly Financial	☐ Surrender the property. ☐ Retain the property and redeem it.	■ No
Description of	2016 GMC Sierra 1500 42511	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	miles VIN 1GTR1LEC8GZ232473 Style / Redux Pouble Ceb 4D	■ Retain the property and [explain]:	
·	Style / Body: Double Cab 4D Engine: 5.3L V8 DI	Continue to make monthly payments.	-
Creditor's AI	. 	Currender the property	_
name:	ly Financial	☐ Surrender the property. ☐ Retain the property and redeem it.	■ No
	2016 GMC Acadia SLE 42511	<u> </u>	■ No □ Yes
name:	2016 GMC Acadia SLE 42511 miles VIN 1GKKRNED3GJ256357	☐ Retain the property and redeem it. ■ Retain the property and enter into a	
name: Description of property	2016 GMC Acadia SLE 42511 miles	 Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. 	

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	rt Kenneth Schmidt Jean Schmidt	Case number (if kn	own)
name:		☐ Retain the property and redeem it.	■ Yes
Description of property securing debt:	2007 Ford Mustang GT 98500 miles VIN 1ZVFT82H875275614 Style / Body: Coupe 2D Engine: 4.6L V8 EFI	□ Retain the property and enter into a Reaffirmation Agreement.■ Retain the property and [explain]:	
	Currently Not Running. Needs Major Electrical Wiring Done, A New Starter, A New Battery And Also Has A Rear Differential Leak.	Continue to make monthly payments.	
Creditor's Di	itech	☐ Surrender the property. ☐ Retain the property and redeem it.	■ No
Description of	6502 Barnes Rd. South	☐ Retain the property and redeem it. ☐ Retain the property and enter into a *Reaffirmation Agreement.*	☐ Yes
property securing debt:	Jacksonville, FL 32216 Duval County County	■ Retain the property and [explain]: Negotitate amount.	
		nexpired leases are leases that are still in effect the trustee does not assume it. 11 U.S.C. § 365	
Deceribe very un	novnivad navasnal nvanavtv lagga		Will the lease be accurred?
•	nexpired personal property leases		Will the lease be assumed?
Lessor's name: Description of lea			□ No
Lessor's name: Description of lea Property:			□ No □ Yes
Lessor's name: Description of lea	sed		□ No □ Yes □ No
Lessor's name: Description of lea Property: Lessor's name: Description of lea Property: Lessor's name:	sed		□ No □ Yes
Lessor's name: Description of lead Property: Lessor's name: Description of lead Property:	sed		□ No □ Yes □ No □ Yes
Lessor's name: Description of lea Property: Lessor's name: Description of lea Property: Lessor's name: Description of lea Property: Lessor's name:	sed		□ No □ Yes □ No □ Yes □ No
Lessor's name: Description of lea Property: Lessor's name: Description of lea Property: Lessor's name: Description of lea Property:	sed		□ No □ Yes □ No □ Yes □ No □ Yes
Lessor's name: Description of lea Property: Lessor's name: Lessor's name: Description of lea Property:	sed sed sed		 No Yes No Yes No Yes No No
Lessor's name: Description of lea Property:	sed sed sed		 No Yes No Yes No Yes No Yes No Yes
Lessor's name: Description of lea Property: Lessor's name: Lessor's name: Lessor's name: Lessor's name: Lessor's name:	sed sed sed sed		 No Yes No Yes No Yes No Yes No Yes No
Lessor's name: Description of lea Property:	sed sed sed sed		 No Yes
Lessor's name: Description of lea Property:	sed sed sed sed sed		 No Yes No Yes No Yes No Yes No Yes No Yes No No No

Official Form 108

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Debtor 1 Robert Kenneth Schm Debtor 2 Calli Jean Schmidt		Robert Kenneth Schmidt Calli Jean Schmidt	Case number (if known)
Part	3: 8	Sign Below	
	•	alty of perjury, I declare that I have indicated at its subject to an unexpired lease.	ed my intention about any property of my estate that secures a debt and any personal
hiohe	arty tii	at is subject to all ullexpilled lease.	
X	/s/ Ro	bbert Kenneth Schmidt	X /s/ Calli Jean Schmidt
<i>^</i>		obert Kenneth Schmidt rt Kenneth Schmidt	X /s/ Calli Jean Schmidt Calli Jean Schmidt
^ -	Robe		

Fill in this info	ormation to identify your case:			e box only as d	irected i	n this form and	in Form
Debtor 1	Robert Kenneth Schmidt		2A-1Sı	nbb:			
Debtor 2	Calli Jean Schmidt		□ 1. T	here is no pres	umption	of abuse	
(Spouse, if filing) United States	s Bankruptcy Court for the: Middle District of F	-lorida	á	The calculation tapplies will be n	nade un	der <i>Chapter 7 N</i>	•
Case number	r		_	Calculation (Off The Means Test		,	cause of
				qualified military			
o	- 4004 4		☐ Ch	eck if this is a	n amer	nded filing	
	Form 122A - 1						
Chapte	r 7 Statement of Your Cur	rent Monthly Inc	om	е			12/1
Part 1: C What is Not i	ate sheet to this form. Include the line number to we feather that you are exempted from any service, complete and file Statement of Exemple Calculate Your Current Monthly Income your marital and filing status? Check one or married. Fill out Column A, lines 2-11. ied and your spouse is filing with you. Fill out ied and your spouse is NOT filing with you.	m a presumption of abuse becau tion from Presumption of Abuse ally. It both Columns A and B, lines	ise you e <i>Under</i>	do not have prin	narily co	nsumer debts or	r because of
	ving in the same household and are not lega	• •	dumne	Δ and R lines 1	D_11		
□ Li	ving separately or are legally separated. Fill of enalty of perjury that you and your spouse are leading apart for reasons that do not include evading	out Column A, lines 2-11; do no egally separated under nonbar	ot fill ou nkruptc	ut Column B. By y law that appli	checkir es or tha		
101(10A). F the 6 month	verage monthly income that you received from all or example, if you are filing on September 15, the 6-m s, add the income for all 6 months and divide the total n the same rental property, put the income from that p	onth period would be March 1 thro by 6. Fill in the result. Do not inclu	ugh Aug de any i	gust 31. If the amount m	ount of your	ur monthly incomonce. For exampl	e varied during le, if both
			Colur			nn B or 2 or iling spouse	
	oss wages, salary, tips, bonuses, overtime, deductions).	and commissions (before all	\$	4,633.54	\$	2,916.66	
	y and maintenance payments. Do not include B is filled in.	payments from a spouse if	\$	0.00	\$	0.00	
of you of from an and room filled in.	nunts from any source which are regularly party our dependents, including child support unmarried partner, members of your household mmates. Include regular contributions from a sp. Do not include payments you listed on line 3.	Include regular contributions I, your dependents, parents, pouse only if Column B is not	\$	0.00	\$	0.00	
5. Net inco	ome from operating a business, profession,	or farm Debtor 1					
Gross re	eceipts (before all deductions)	\$0.00					
•	y and necessary operating expenses	-\$ <u>0.00</u> m \$ 0.00 Copy here ->	. ¢	0.00	\$	0.00	
	nthly income from a business, profession, or far	Copy nerc >	Ψ	0.00	Ψ	0.00	
J. 1461 11101	one ironi rentar and other real property	Debtor 1					
Gross re	eceipts (before all deductions)	\$0.00					
Ordinary	y and necessary operating expenses	-\$ 0.00					
Net mor	nthly income from rental or other real property	\$0.00 Copy here ->	· —	0.00	\$	0.00	
7 Interest	dividends and royalties		\$	0.00	\$	0.00	

Official Form 122A-1

7. Interest, dividends, and royalties

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Debtor Debtor	1		t Kenneth Schmidt ean Schmidt				Case numbe	r (<i>if known</i>)			
							Column A Debtor 1		Column B Debtor 2 o	or	
8.	Unem	ploym	ent compensation				\$	0.00	\$	0.00	
			the amount if you contend the curity Act. Instead, list it her		t received was a bene	efit unde	er				
					C	.00					
			pouse			.00					
	benefi	t unde	retirement income. Do not in the Social Security Act.	·			*	332.00	\$	0.00	
	Do not receive	t included as a stic ter	n all other sources not listed any benefits received und a victim of a war crime, a crir rorism. If necessary, list othe	er the Social S ne against hur	Security Act or payme manity, or internation	nts al or					
							\$	0.00	\$	0.00	
							\$	0.00	\$	0.00	
			al amounts from separate pa			+	. \$	0.00	\$	0.00	
			our total current monthly in .Then add the total for Colu			\$	5,965.54	+ -	2,916.66	\$	8,882.20
Part	2.	Deter	mine Whether the Means 1	Test Annlies t	o You					Total o	eurrent monthly
			our current monthly incom								
			-	-			Com	ı lina 11	hava .	•	0.000.00
	12a. C	ору у	our total current monthly inco	me from line	11		Cop	y line 11	nere=>	\$	8,882.20
	M	lultiply	by 12 (the number of month	s in a year)						X '	12
	12b. T	he res	sult is your annual income for	this part of th	e form				12	b. \$1	06,586.40
13.	Calcu	late th	e median family income th	at applies to	you. Follow these ste	eps:					
	Fill in t	the sta	te in which you live.		FL						
	Fill in t	the nu	mber of people in your house	ehold.	6						
	To find	d a list	edian family income for your of applicable median income This list may also be availab	e amounts, go	online using the link	specifie	d in the separa	ate instruc	tions 13	. \$	91,312.00
14.	How o	o the	lines compare?								
	14a.		Line 12b is less than or equal Go to Part 3.	al to line 13. O	n the top of page 1, o	heck bo	ox 1, There is i	no presun	nption of abu	se.	
	14b.		Line 12b is more than line 13 Go to Part 3 and fill out Form		of page 1, check box	2, The p	oresumption of	fabuse is	determined l	by Form 12	22A-2.
Part:	3:	Sign	Below								
	В	y sign	ing here, I declare under per	nalty of perjury	that the information	on this s	statement and	in any att	achments is	true and c	orrect.
	X		Robert Kenneth Schmidt		X		li Jean Schm				
			ert Kenneth Schmidt ature of Debtor 1				ean Schmidt ıre of Debtor 2				
	Date		10, 2018 DD / YYYY		Date		0, 2018 D / YYYY				
	lf	you c	hecked line 14a, do NOT fill	out or file Forr	n 122A-2.						
	lf	you c	hecked line 14b, fill out Form	122A-2 and f	ile it with this form.						

Robert Kenneth Schmidt

Fill in this info	rmation to identify your case:
Debtor 1	Robert Kenneth Schmidt
Debtor 2 (Spouse, if filing	Calli Jean Schmidt
	ankruptcy Court for the: Middle District of Florida
Case number (if known)	

Check the appropriate box as directed in lines 40 or 42:
According to the calculations required by this Statement:
■ 1. There is no presumption of abuse.
\square 2. There is a presumption of abuse.

☐ Check if this is an amended filing

Official Form 122A - 2

Chapter 7 Means Test Calculation

04/16

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Par	t 1: Determ	nine Your Adjusted Income					
1.	Copy your tot	tal current monthly income.	Copy line 11 from (Official Form 122A	-1 here=>	\$	8,882.20
2.	□ No. Fill in	\$\text{st Column B in Part 1 of Form 122A-1?} \$0 for the total on line 3. Fill in \$0 for the total on line 3.					
3.	On line 11, Co expenses of your No. Fill in Yes. Fill in	current monthly income by subtracting any particles of you or your dependents. Follow the subtracting any particles of you or your dependents? Of or the total on line 3. the information below: ach purpose for which the income was used mple, the income is used to pay your spouse's tax	ese steps:	ed for your spouse Fill in the amount are subtracting from	NOT regularly use	ed for the ho	ousehold
	support	other than you or your dependents.	\$ \$ \$ \$		Copy total here=	»··· - \$ _	0.00
4.	Adjust your c	current monthly income. Subtract line 3 from li	ine 1.			\$	8,882.20

Official Form 122A-2

Debtor 1 Debtor 2	Robert Kenneth Schmidt Calli Jean Schmidt	Case number (if known)
Part 2:	Calculate Your Deductions from Your Income	
to ans		Local Standards for certain expense amounts. Use these amounts andards, go online using the link specified in the separate available at the bankruptcy clerk's office.
your a	actual expenses if they are higher than the standards. D	s of your actual expense. In later parts of the form, you will use some of Do not deduct any amounts that you subtracted fro your spouse's that you subtracted from in income in lines 5 and 6 of form 122A-1.
If you	expenses differ from month to month, enter the average	ge expense.
When	ever this part of the from refers to you, it means both yo	ou and your spouse if Column B of Form 122A-1 is filled in.
5. 1	The number of people used in determining your ded	ductions from income
þ	Fill in the number of people who could be claimed as explus the number of any additional dependents whom you he number of people in your household.	
Natio	nal Standards You must use the IRS Nationa	al Standards to answer the questions in lines 6-7.
	Food, clothing, and other items: Using the number of Standards, fill in the dollar amount for food, clothing, and	
t p	he dollar amount for out-of-pocket health care. The num	ber of people you entered in line 5 and the IRS National Standards, fill in mber of people is split into two categoriespeople who are under 65 and a higher IRS allowance for health care costs. If your actual expenses are ional amount on line 22.
Peopl	le who are under 65 years of age	
7	a. Out-of-pocket health care allowance per person	\$52_
7	b. Number of people who are under 65	X6_
7	c. Subtotal. Multiply line 7a by line 7b.	\$ 312.00 Copy here=> \$ 312.00
People	le who are 65 years of age or older	
7	d. Out-of-pocket health care allowance per person	\$114_
7	e. Number of people who are 65 or older	x 0
7	f. Subtotal. Multiply line 7d by line 7e.	\$ 0.00 Copy here=> +\$ 0.00
7	g. T otal. Add line 7c and line 7f	\$312.00 Copy total here=> \$312.00

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Robert Kenneth Schmidt Debtor 1 Calli Jean Schmidt Debtor 2 Case number (if known) Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 691.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 1.249.00 listed for your county for mortgage or rent expenses..... 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment Ditech \$ 812.00 Repeat this Сору amount on Total average monthly payment 812.00 812.00 here=> 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 437.00 437.00 \$ or rent expense). If this amount is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. ☐ 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the

operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

392.00

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Case number (if known)

		y not claim the expense i an two vehicles.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
Ve	hicle 1		2016 GMC Sierra 1500 - Style / Body: Double Ca		-		SZ232	2473		
13a.	Owners	hip or leasing costs using	IRS Local Standard			\$	4	97.00		
13b.	·	e monthly payment for all include costs for leased v	debts secured by Vehicle 1 ehicles.							
	are cont		payment here and on line cured creditor in the 60 mon			at				
	Na	me of each creditor for	Vehicle 1	Average payment						
	All	ly Financial		\$	549.13					
		Total A	verage Monthly Payment	\$	549.13	Copy here =>	-\$_	549	Repeat this amount on line 33b.	
13c.	Net Veh	nicle 1 ownership or lease	expense						Copy net Vehicle 1	
	Subtrac	t line 13b from line 13a. i	f this amount is less than \$0), enter \$0.		\$		0.00	expense here => \$	0.00
Ve	Subtract	Describe Vehicle 2:	f this amount is less than \$0 2016 GMC Acadia SLE Style / Body: SUV 4D Er	42511 mile			GJ25			0.00
	hicle 2	Describe Vehicle 2:	2016 GMC Acadia SLE	42511 mile ngine: 3.6L	. V6 DI	KRNED3				0.00
13d.	hicle 2 Owners	Describe Vehicle 2: hip or leasing costs using	2016 GMC Acadia SLE Style / Body: SUV 4D Er	42511 mile ngine: 3.6L	V6 DI	KRNED3		6357		0.00
13d.	Ownersi Average leased v	Describe Vehicle 2: hip or leasing costs using monthly payment for all	2016 GMC Acadia SLE Style / Body: SUV 4D Er IRS Local Standard debts secured by Vehicle 2	42511 mile ngine: 3.6L	. V6 DI	KRNED3		6357		0.00
13d.	Owners Average leased v	Describe Vehicle 2: hip or leasing costs using emonthly payment for all vehicles.	2016 GMC Acadia SLE Style / Body: SUV 4D Er IRS Local Standard debts secured by Vehicle 2	42511 milengine: 3.6L	. V6 DI	KRNED3		6357		0.00
13d.	Owners Average leased v	Describe Vehicle 2: hip or leasing costs using emonthly payment for all vehicles. me of each creditor for all y Financial	2016 GMC Acadia SLE Style / Body: SUV 4D Er IRS Local Standard debts secured by Vehicle 2	42511 milengine: 3.6L	. V6 DI	KRNED3		6357	Repeat this amount on	0.00
13d.	Owners Average leased v Na All	Describe Vehicle 2: thip or leasing costs using emonthly payment for all vehicles. Total A hicle 2 ownership or lease	2016 GMC Acadia SLE Style / Body: SUV 4D Er g IRS Local Standard	42511 mile ngine: 3.6L Do not incl Average payment \$\$	wonthly 546.65	KRNED3		97.00	here => \$ Repeat this amount on	0.00
13d. 13e.	Owners Average leased v Na All Net Veh Subtract	Describe Vehicle 2: thip or leasing costs using the monthly payment for all vehicles. Total A ficle 2 ownership or lease at line 13e from line 13d. interpretation expense	2016 GMC Acadia SLE Style / Body: SUV 4D Er glRS Local Standard	42511 mile ngine: 3.6L	wonthly 546.65 546.65	Copy here => -\$ _	4	6357 197.00 546.6	Repeat this amount on line 33c. Copy net Vehicle 2 expense here => \$	

Robert Kenneth Schmidt

Calli Jean Schmidt

Debtor 1 Debtor 2

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Debtor 1
Debtor 2
Robert Kenneth Schmidt
Calli Jean Schmidt
Case number (if known)

Oth	ner Necessary Expenses In addition to the the following IRS	expense deductions listed above, you are allowed your monthly expenses categories.	for	
16.	self-employment taxes, social security taxes,	ill actually owe for federal, state and local taxes, such as income taxes, and Medicare taxes. You may include the monthly amount withheld from pect to receive a tax refund, you must divide the expected refund by 12 thly amount that is withheld to pay for taxes.		
	Do not include real estate, sales, or use taxe	S.	\$	1,360.00
17.	Involuntary deductions: The total monthly contributions, union dues, and uniform costs	payroll deductions that your job requires, such as retirement		
	Do not include amounts that are not required	by your job, such as voluntary 401(k) contributions or payroll savings.	\$	161.22
18.	filing together, include payments that you ma	that you pay for your own term life insurance. If two married people are ake for your spouse's term life insurance. Do not include premiums for life in spouse's life insurance, or for any form of life insurance other than	\$	15.28
19.	Court-ordered payments: The total monthly administrative agency, such as spousal or ch	y amount that you pay as required by the order of a court or nild support payments.		
	Do not include payments on past due obligat	tions for spousal or child support. You will list these obligations in line 35.	\$	425.00
20.	Education: The total monthly amount that you as a condition for your job, or	ou pay for education that is either required:		
	• • •	dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total monthly amount that yo	u pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments for any elementary	or secondary school education.	\$	0.00
22.	that is required for the health and welfare of	ng insurance costs: The monthly amount that you pay for health care you or your dependents and that is not reimbursed by insurance or paid amount that is more than the total entered in line 7.		0.00
	Payments for health insurance or health savi	ings accounts should be listed only in line 25.	\$	0.00
23.	for you and your dependents, such as pager	Ps: The total monthly amount that you pay for telecommunication services s, call waiting, caller identification, special long distance, or business cell our health and welfare or that of your dependents or for the production of yer.		
		phone, internet and cell phone service. Do not include self-employment of Official Form 122A-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses allowed under the Add lines 6 through 23.	e IRS expense allowances.	\$	6,201.50

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Debtor 1
Debtor 2
Robert Kenneth Schmidt
Calli Jean Schmidt
Case number (if known)

Add	itional	Expense Deductions	These are addition	al deduction	s allowed by th	e Means Test.		
			Note: Do not include	de any exper	nse allowances	listed in lines 6-24.		
25.	insura					ses. The monthly expenses for health y necessary for yourself, your spouse, o	or	
	Health	insurance		\$	37.50			
	Disabi	lity insurance		\$	150.26			
	Health	savings account		+ \$	0.00			
	Total			\$	187.76	Copy total here=>	\$	187.76
	Do you	actually spend this total	amount?					
		No. How much do you a	ctually spend?					
		Yes		\$				
26.	continu	ue to pay for the reasonab	ole and necessary co our immediate family	are and supp / who is unat	oort of an elderl ble to pay for si	actual monthly expenses that you will y, chronically ill, or disabled member of uch expenses. These expenses may 19A(b).	\$	0.00
27.						nses that you incur to maintain the es Act or other federal laws that apply.		
	By law	, the court must keep the	nature of these exp	enses confid	lential.		\$	0.00
28.	Additi line 8.	onal home energy costs	. Your home energy	costs are in	ncluded in your	insurance and operating expenses on		
		believe that you have hom fill in the excess amount			an the home er	nergy costs included in expenses on line)	
		ust give your case trustee at claimed is reasonable a		our actual e	xpenses, and y	rou must show that the additional	\$	0.00
29.	\$160.4		for your dependent			e monthly expenses (not more than han 18 years old to attend a private or		
		ust give your case trusteed is reasonable and nece				ou must explain why the amount 23.		
	* Subje	ect to adjustment on 4/01/	19, and every 3 yea	rs after that	for cases begu	n on or after the date of adjustment.	\$	0.00
30.	higher		and clothing allowan	ces in the IR	S National Sta	ctual food and clothing expenses are ndards. That amount cannot be more		
		d a chart showing the max tions for this form. This ch				link specified in the separate rk's office.		
	You m	ust show that the addition	al amount claimed i	s reasonable	e and necessar	y.	\$	0.00
31.		nuing charitable contribution on the number of the number				ntribute in the form of cash or financial	+\$	0.00
32.		II of the additional expenses 25 through 31.	nse deductions.				\$	187.76

Debtor 1
Debtor 2
Robert Kenneth Schmidt
Calli Jean Schmidt
Case number (if known)

Deduct	ions for Debt Payment						
	debts that are secured by an interests, and other secured debt, fill in lin	st in property that you own, including home es 33a through 33e.	mor	tgages, vehicle			
	calculate the total average monthly pay litor in the 60 months after you file for l	ment, add all amounts that are contractually du pankruptcy. Then divide by 60.	e to	each secured			
	Mortgages on your home:					verag	ge monthly ent
33a.	Copy line 9b here				=> \$		812.00
	Loans on your first two vehicles:						
33b.	Copy line 13b here			:	=> \$		549.13
					=> \$		546.65
	List other secured debts:						
Name of	each creditor for other secured debt	Identify property that secures the debt		Does payment include taxes insurance?			
		2007 Ford Mustang GT 98500 miles VIN 1ZVFT82H875275614 Style / Body: Coupe 2D Engine: 4.6L EFI Currently Not Running. Needs Major Electrical Wiring Done, A New Starter New Battery And Also Has A Rear Differential Leak.	\$_	■ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes	\$ +\$ Copy total here=:		2,007.74
34. Are or o	ther property necessary for your su	secured by your primary residence, a vehicle pport or the support of your dependents?) ,				
	No. Go to line 35.						
		pay to a creditor, in addition to the payments sion of your property (called the <i>cure amount</i>). information below.					
Name o	of the creditor	Identify property that secures the debt		Total cure amount			onthly cure nount
Ditech	1	6502 Barnes Rd. South Jacksonville, FL 32216 Duval County County		\$ 10,721.00		_	178.68
				. ———	÷ 60 = \$		
			_	\$	÷ 60 = +	₿	
		Total	\$	178.68	Copy total here=	, \$	178.68
			Ľ-			٠.	

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Debtor 1 Debtor 2		ert Kenneth Schmidt Jean Schmidt	Case number (if kr	nown)		
		owe any priority claims such as a priority tax, child support, or alimony due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.	/ - that			
_	No.	Go to line 36.				
	Yes.	Fill in the total amount of all of these priority claims. Do not include current ongoing priority claims, such as those you listed in line 19.	or			
		Total amount of all past-due priority claims	\$	0.00	÷ 60 =	\$ 0.00

Debtor 1 Debtor 2		ert Kenneth Schmidt Jean Schmidt			Case	e nu	umber (<i>if known</i>)			
F	or more	eligible to file a case under information, go online using ns for this form. Bankruptcy E	the link for <i>Bankruptcy Bas</i>	ics specified						
	□ No.	Go to line 37.								
	Yes.	Fill in the following information	on.							
		Projected monthly plan payr	nent if you were filing unde	r Chapter 13		\$	2.06	60.00		
		Current multiplier for your di Administrative Office of the land North Carolina) or by th (for all other districts).	United States Courts (for di	stricts in Ala	stees	X _	10.00)		
		To find a list of district multip the link specified in the sepa be available at the bankrupt	rate instructions for this for						Copy total	
		Average monthly administra	tive expense if you were fil	ing under Ch	apter 13		\$ 206.	^^	nere=> \$	206.00
		of the deductions for debt	payment.						\$	2,392.42
Tota	l Deduc	tions from Income								
38. A	Add all c	of the allowed deductions.								
		ne 24, All of the expenses allo e allowances	wed under IRS	\$	6,201.50)				
	Copy lin	ne 32, All of the additional exp	ense deductions	\$	187.76	6				
	Copy lin	ne 37, All of the deductions fo	r debt payment	+\$	2,392.42	<u>-</u>	٦			
			Total deductions	\$	8,781.68	<u>}</u>	Copy total	here	=> \$	8,781.68
Part 3:	Det	ermine Whether There is a	Presumption of Abuse							
39. C	Calculate	e monthly disposable incon	ne for 60 months							
	39a. Co	py line 4, adjusted current mo	onthly income	\$	8,882.20)_				
	39b. Co	py line 38, Total deductions		- \$	8,781.68	3_				
		onthly disposable income. 11 btract line 39b from line 39a	J.S.C. § 707(b)(2).	\$	100.52	<u> </u>	Copy here=>\$		100.52	
	For the	next 60 months (5 years)					_	x 60		
]		
	39d. To	tal. Multiply line 39c by 60		39d.	\$	6	5,031.20	Copy here=>	\$	6,031.20
40. F	ind out	whether there is a presump	otion of abuse. Check the	box that app	lies:			J		
	■ The I	ine 39d is less than \$7,700*	. On the top of page 1 of th	is form, chec	k box 1, <i>The</i>	ere	is no presur	mption o	f abuse. Go to	Part 5.
[ine 39d is more than \$12,85 4 if you claim special circumst		this form, ch	eck box 2, 7	The	ere is a presu	ımption	of abuse. You r	nay fill out
	☐ The I	ine 39d is at least \$7,700*, k	out not more than \$12,850)*. Go to line	41.					
*	Subject	to adjustment on 4/01/19, and	d every 3 years after that fo	or cases filed	on or after tl	he	date of adjus	stment.		

Robert Kenneth Schmidt

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Debtor 1		ert Kenneth Schmidt	
ebtor 2	Calli	Jean Schmidt	Case number (if known)
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you fill A Summary of Your Assets and Liabilities and Certain Statistical Inform Schedules (Official Form 106Sum), you may refer to line 3b on that form	ation
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)	
25	% of y	Multiply line 41a by 0.25 ne whether the income you have left over after subtracting all allowed our unsecured, nonpriority debt. e box that applies:	
		39d is less than line 41b. On the top of page 1 of this form, check box 1 Part 5.	, There is no presumption of abuse.
		39d is equal to or more than line 41b. On the top of page 1 of this form <i>umption of abuse.</i> You may fill out Part 4 if you claim special circumstance.	
Part 4:	Giv	re Details About Special Circumstances	
		ve any special circumstances that justify additional expenses or adjusternative? 11 U.S.C. § 707(b)(2)(B).	ustments of current monthly income for which there is no
■ N	lo. Go	to Part 5.	
□ Y		l in the following information. All figures should reflect your average mont m. You may include expenses you listed in line 25.	hly expense or income adjustment for each
	ne	u must give a detailed explanation of the special circumstances that mak cessary and reasonable. You must also give your case trustee document justments.	
	G	ive a detailed explanation of the special circumstances	Average monthly expense or income adjustment
	_		\$
	_		
	_		
	_		
Part 5:	_	n Below gning here, I declare under penalty of perjury that the information on this	statement and in any attachments is true and correct
			Ili Jean Schmidt
	Ro	obert Kenneth Schmidt Calli C	lean Schmidt
Da	te Ma	ay 10, 2018 Date May 1	
	M	M/DD/YYYY MM/I	DD /YYYY

Debtor 1 Debtor 2 Calli Jean Schmidt Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 11/01/2017 to 04/30/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Defense Finance And Acct Services

Income by Month:

6 Months Ago:	11/2017	\$4,755.40
5 Months Ago:	12/2017	\$6,983.13
4 Months Ago:	01/2018	\$5,390.06
3 Months Ago:	02/2018	\$4,018.01
2 Months Ago:	03/2018	\$4,531.62
Last Month:	04/2018	\$2,123.03
	Average per month:	\$4,633.54

Line 9 - Pension and retirement income Source of Income: Military Retirement Constant income of \$1,332.00 per month. Debtor 1 Debtor 2 Calli Jean Schmidt Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 11/01/2017 to 04/30/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: HomeTown Threads

Income by Month:

6 Months Ago:	11/2017	\$2,916.66
5 Months Ago:	12/2017	\$2,916.66
4 Months Ago:	01/2018	\$2,916.66
3 Months Ago:	02/2018	\$2,916.66
2 Months Ago:	03/2018	\$2,916.66
Last Month:	04/2018	\$2,916.66
	Average per month:	\$2,916.66
	~ -	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation
\$24	5	filing fee
\$7	5	administrative fee
+ \$1	5	trustee surcharge
\$33	5	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
•	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Middle District of Florida

In re	Calli Jean Schmidt		Case No.		
		Debtor(s)	Chapter 7		
	VER	IFICATION OF CREDITOR	MATRIX		
Γhe ab	ove-named Debtors hereby verify	that the attached list of creditors is true and co	orrect to the best of their knowledge.		
Date:	May 10, 2018	/s/ Robert Kenneth Schmidt			
Dute.	,,	Robert Kenneth Schmidt			
		Signature of Debtor			
Date:	May 10, 2018	/s/ Calli Jean Schmidt			
		Calli Jean Schmidt		-	

Signature of Debtor

Robert Kenneth Schmidt

Robert Kenneth Schmidt 6502 Barnes Road South Jacksonville, FL 32216 Cooling & Winter, LLC 7901 SW 6th Court Suite 310 Fort Lauderdale, FL 33324

Calli Jean Schmidt 6502 Barnes Road South Jacksonville, FL 32216

Ditech Attn: Bankruptcy Po Box 6172 Rapid City, SD 57709

Melanie J. Sacks, Esquire Law Offices of Sacks & Sacks, P.A. 1646 Emerson Street, Suite B Jacksonville, FL 32207 Mg Credit 5115 San Juan Ave Jacksonville, FL 32210

Ally Financial Attn: Bankruptcy Po Box 380901 Bloomington, MN 55438 Navy Federal Cr Union Attn: Bankruptcy Po Box 3000 Merrifield, VA 22119

Anthony J. Maniscalco, Esq. Cooling & Winter, LLC 7901 SW 6th Ct, Suite 310 Fort Lauderdale, FL 33324

North Cash P.O. Box 498 Hays, MT 59527

Badcock Attn: Legal Department P.O. Box 232 Mulberry, FL 33860 Plain Green Loans 93 Mack Road, Suite 600 Po Box 270 Box Elder, MT 59521

Bank of America 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634 Princy Valiathodathil, Esq. Tromberg Law Group, PA 1515 S Federal Hwy Ste 100 Boca Raton, FL 33432-7404

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Professional Debt Mediation Attn: Bankruptcy 7948 Baymeadows Way, 2nd Floor Jacksonville, FL 32256

Cig Financial 6 Executive Circle Ste 100 Irvine, CA 92614 Us Dept Of Ed/Great Lakes Higher Educati Attn: Bankruptcy 2401 Interanational Lane Madison, WI 53704 B2030 (Form 2030) (12/15)

United States Bankruptcy Court Middle District of Florida

In re	Robert Kenneth Schmidt Calli Jean Schmidt		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENSATI	ION OF ATTOR	RNEY FOR DI	EBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I cer compensation paid to me within one year before the filing of the be rendered on behalf of the debtor(s) in contemplation of or in c	petition in bankruptcy,	or agreed to be paid	to me, for services rendered	l or to
	For legal services, I have agreed to accept		\$	2,012.00	
	Prior to the filing of this statement I have received		\$	2,012.00	
	Balance Due		\$	0.00	
2.	\$_335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compensation	with any other person t	unless they are mem	bers and associates of my la	w firm.
	☐ I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the				n. A
5.	In return for the above-disclosed fee, I have agreed to render legal	al service for all aspects	of the bankruptcy	ease, including:	
	a. Representation of the debtor at the meeting of creditors and cob. [Other provisions as needed]Attorney shall meet and consult with Client as needed	ded, prepare the Petit	ion, its accompan	/ing exhibits, Form 22(a),	
	Statement of Affairs, Schedules and Summaries as required by the Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the Local Rules of the Court, as well as any other documents or pleadings which are necessary or appropriate to constitute a complete chapter 7 filing, and file same with the Clerk of the United States Bankruptcy Cour That the firm will continue to represent the debtor in the case even where the debtor chooses not to retain the firm for				
	post-petition services until the Court enters an order				
7.	By agreement with the debtor(s), the above-disclosed fee does not include the following service: The contract between the parties does not include providing post-petition legal services on Client's behalf; it is limited solely to the preparation and filing of Client's case.				ed
	CERT	TIFICATION			
	I certify that the foregoing is a complete statement of any agreem pankruptcy proceeding.	ent or arrangement for	payment to me for r	epresentation of the debtor(s	s) in
Ν	May 10, 2018	/s/ Melanie J. Sack	s, Esquire		
I	Date	Melanie J. Sacks, E			
		Signature of Attorney Law Offices of Sac	ks & Sacks, P.A.		
		1646 Emerson Stre Jacksonville, FL 32			
		(904) 396-5557 Fa		3	
		Melanie@sacksand			
		Name of law firm			